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AUTHOR	Cuthbertson, Diana; Urban, Julie V.
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ABSTRACT

The report documents activities of Project Outreach, U.S.A., a 1-year outreach project designed to provide assistance and inservice training to promote the development or improvement of programs for blind and visually impaired young children. The project's goals are reviewed along with project staffing planning and preparation, and types of services provided to children (indirect), parents (primarily information and support), and professionals. The program consists of four major components: (1) home teaching for infants and their families, (2) a center-based program, (3) transition service for entrance into programs at age 3, and (4) cooperative and coordinated activities with local and state medical centers and organizations and public health programs. Outreach was provided to state education agencies in Maine and Alabama and to parent groups in Massachusetts, Connecticut, South Carolina, and New Hampshire. Outreach efforts were also provided to Boston Public Schools and various early intervention programs. Liaison activities took the form of inservice staff training, linkages, field testing, awareness activities, and spin-offs. Extensive appendixes include an evaluation summary, a resource manual for parents, and sample newletters. (CL)

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HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAM

1983-1984 PROGRESS REPORT

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PROJECT OUTREACH, U.S.A.
INFANT-TODDLER, BIRTH-3
(Blind or Visually Impaired)
INTERNATIONAL INSTITUTE FOR VISUALLY IMPAIRED, 0-7, INC.
1387 WASHINGTON STREET
WEST NEWTON, MASSACHUSETTS 02165
TELEPHONE: (617) 332-4014

SHERRY RAYNOR, DIRECTOR

REPORT PREPARED BY:

DIANA CUTHBERTSON, PARENT COORDINATOR
JULIE V. URBAN, EDUCATION COORDINATOR

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PROGRESS REPORT

Project Outreach, U.S.A., Infant-Toddler, Birth - 3
(Blind or Visually Impaired)

Outreach Project

International Institute For Visually Impaired, 0-7, Inc.

West Newton, Massachusetts 02165

This Progress Report is submitted for PROJECT OUTREACH, U.S.A., Infant-Toddler, Birth - Three (Blind or Visually Impaired). A one year Outreach Project funded under HCEEP. It documents activities accomplished during the period from July 1, 1983 through September 30, 1984.

The primary goal of Project Outreach, U.S.A. during its funding period was to provide assistance and inservice to others to promote the development or improvement of programs for blind and visually impaired young children.

PROJECT GOALS

The major goals as outlined in the grant proposal of Project Outreach, U.S.A. for birth to three year old blind and visually impaired young children and their parents were:

I. To assist and encourage the development of quality programs for children who are blind or have visual impairments (birth to three year olds).

II. To assist and encourage improvement of existing programs.

III. To broaden awareness in parents and professionals of the effects of blindness and visual impairement on growth, development and learning.

IV. To establish linkages and provide assistance for training programs to increase awareness of the unique needs of the blind and visually impaired infant and young child (birth to three years old.)

STATEMENT OF NEED

The care of handicapped children presents one of the most difficult social dilemmas that we, as a country, face today. The right of disabled children to medical attention, to an appropriate education, and to access their communities is often a topic of debate in the government and the press. The development of educational responses to the needs of handicapped children has created an extensive body of curriculum designed to assist most disabled children to achieve their fullest potential.

The plight of the infants or toddlers who are blind or visually impaired is a difficult one. Without the presence of visual stimuli, these children's world is very circumscribed. They must be taught in a special manner if they are to know what they can hear, smell, taste and touch. The objects in the world, although within arms' reach, must be given meaning. There is tremendous potential for young blind or visually impaired children to be assisted by their parents to develop physically, emotionally, and intellectually to achieve normal levels.

A body of research exists that demonstrates the success of early intervention programs in alleviating developmental lags and maladaptive behaviors which were once considered a foregone result of early visual impairment. The challenge to those working with these children, given the importance of these early interventions, is a tremendous and awesome one, because much of these children's potential for leading productive, full lives as adults rests with the care which parents can provide following the diagnosis of blindness or severe visual impairment.

Project Outreach, U.S.A. utilizing the Perkins School for the Blind Infant-Toddler Program as a model demonstration site for a nation-wide outreach project, has witnessed the need for services for infant and preschool blind and visually impaired children in every part of the country. The requests for assistance from across the nation during the implementation of Project Outreach, U.S.A. have been overwhelming and document the tremendous need for the services Project Outreach provides, not only for the birth to three population, but for all ages of preschool blind and visually impaired children. In the short time it has been funded, more than forty requests for assistance have been received by Project Outreach U.S.A. from State Departments of Education, Commissions for the Blind, schools for the blind and early childhood programs.

Information from the National Society to Prevent Blindness, the Eye Research Institute of the Retina Foundation, Inc., U.N.I.C.E.F., reports from programs, and our own experience document that blindness and visual impairments are increasing among children. (See Appendix F) This increase in the incidence of children suspected to be, or already identified as eligible and requiring special programs and services gives credence to the necessity for increasing the number of programs and services available and for improving the quality of existing programs and services for the blind and visually impaired preschool population and their parents. No one project can respond adequately to the number of requests.

It is important to remember that blind infants and young children cannot integrate the world through vision. Considering vision's major impact on all areas of development, such children are at high risk for significant developmental lags. Without the stimulation vision provides, "for these children, retardation and restriction of muscular activity are the order of the day" and "...the blind baby, although not intentially restricted yet behaves in many respects like a restricted child," (Burlingham, 1967). The situation is further compounded by the fact that training programs for teachers to work with blind and visually impaired infants and young children and their parents are few in number and vary in quality.

The parents of blind and visually impaired infants and toddlers must assume a high degreee of responsibility for the children's growth and progress. All parents are the first teachers of their children and the parents of blind or visually impaired children must learn how to interpret the "sighted" world for their children. Blind and visually impaired children do not learn through imitation. Their parents need special information and support so that they many encourage appropriate behavior and provide experiences for development. This is critical to helping their children achieve and develop optimally.

Requests from parents and professionals received by the project document the need for appropriate training and for an information source to assist them with the perplexing problems they face with visually impaired children. There are few materials for parents, especially for the period from birth to age three. Therefore, there is a need for continued development and dissemination of materials and programmatic assistance. During the three years in which the Perkins Model Demonstration Project was funded, the staff developed drafts of materials which defined the skills and knowledge necessary to assist in providing increased service and support of parents to sucessfully work and live with visually impaired and blind infants.

It has become increasingly important for the knowledge and skills developed through the Demonstration Project for Birth to Three at Perkins to be utilized and expanded to meet a broader national need. Currently there exists no service, local or national, other than Project Outreach, U.S.A. that acts as a resource center to develop and provide the services and materials necessary to respond to requests for assistance.

The lack of awareness by the public concerning blindness in the early years still needs to be addressed. It is only through a growing public awareness of the existence of blind infants and young children and their increasing numbers that the support, both moral and financial, for services will develop. In addition, this awareness helps to lessen the isolation experienced by the parents of these children and gives impetus to increase the early diagnosis, identification and referral of children for services.

Project Outreach,U.S.A. has focused on the need to educate the general public concerning the needs of young blind and visually impaired children by devloping strong linkages with community groups. The New England media have been very supportive of the efforts of Project Outreach, U.S.A. and have demonstrated an increased awareness to the needs of young blind and visually impaired children, reflected in their sensitive reporting. The awareness campaign initiated by Project Outreach, U.S.A. is an excellent beginning, but ongoing efforts will be necessary to continue the educational process.

PROGRAM PHILOSOPHY

The staff of Project Outreach, U.S.A. firmly believes that parents are the best, the first and the most important teachers of their children. Therefore, our stance is that the parents be considered full partners in developing services rather than merely recipients of the services. With this as a central philosophical position, Project Outreach, U.S.A. staff include a parent of a blind or visually impaired child as a presenter at all workshops and inservices. In addition, Project Outreach always encourages the host agency to invite local parents to attend the workshops, conferences, and activities conducted by Project Outreach staff.

Throughout the inservice and workshop presentations, project staff encouraged teachers, nurses and administrators to view parents less as clients and more as partners on the team. Great efforts were taken to dispel the myth that parents are unable to cope and are in need of direct intervention by professionals. Rather, professionals were encouraged to focus on the strengths of the family and their ability to cope with stresses and to summon resources as needed.

PROJECT STAFF

The staff for Project Outreach, U.S.A. consisted of:

Project Director
Education Coordinator
Parent Coordinator
Project Secretary (two secretaries worked 50% each)

Consultants to the Project were utilized to provide additional support or services to the staff as well as participating in workshops:

Speech and Language Therapist
Psychologist
Adaptive Environments Consultant
Media Technician
Vision Resource Consultant (Retired from Boston Schools)

Weekly staff meetings were conducted by the project director to coordinate project activities and develop strategies for meeting the many requests for inservice education received from throughout the country.

PLANNING AND PREPARATION

Although the project was funded from July 1, 1983 to June 30, 1984, funds had still not been received in September. The project director took out a personal loan in order that work could proceed. Federal funds were not received until mid-October, 1984.

Equipment was borrowed, office space found, and planning went ahead. Activity sheets, logs, and other organizational forms were developed during the first months. (Appendix A) Goals and timelines were reviewed at weekly staff meetings. Consultants to Project Outreach, U.S.A. attended the early staff meetings as a vital part of the planning process.

In addition, the staff developed a core of presentations to be used at selected sites, based on past information that could now be adjusted to best meet the needs identified through needs assessments administered to each group. Inservice topics included:

Working with Parents: parent support, parent activities, home teaching, record keeping, toys (homemade and commercial), speech and language, parent evaluation of program procedures.

Assessment and Curriculum: GUIDE, Maxfield-Bucholz Social Maturity Scale for Preschool Blind Children, Nisonger Curriculum, OR Project and informal functional visual assessment instruments.

Program Components: development of an individual service plan, overview of a center-base program, adaptation of the environment to meet staff and children's needs, record keeping, liaison with a developmental evaluation team, suggestions for speech and language programs and integrated settings.

SERVICES TO CHILDREN

Although Project Outreach,U.S.A. does not provide direct intervention with children who are blind or visually impaired, it is reported by participants of the inservices, workshops, and consultations that more than 2,500 young children benefited from the assistance provided by Project Outreach, U.S.A. Educational administrators, teachers, social workers, nurses, educators of teachers, and parents are the target populations served by the project.

At times consultation was provided, on a limited basis, to individual families and those who work with them. Generally, this took place at early intervention programs and were of benefit to the parents and staff connected with the programs.

The Project Director did provide home teaching on a frequent basis to a Hispanic preschool child and her family. The Project Director is the only trained vision teacher in the area who is fluent in Spanish. Other programs did not feel confident in their ability to provide early intervention to this child due to the difficulties in communication.

Numerous workshops this year were conducted with professionals who work in state agencies, early childhood programs, as well as parent groups. A greater number of children were served than anticipated, since many of those attending the workshops had the responsibility of overseeing a large caseload.

The significant impact of the workshops on the attendees, as reflected in the evaluations, demonstrates growth in their ability to assess visually impaired and blind children, their programs and in developing individualized service plans. In addition, the participants felt that their interactions with parents required reassessment. In fact, an ever increasing number have come to the realization that parents must indeed be recognized as full partners with the professionals. With help parents can become the best teachers of their children at this early age.

SERVICES TO PARENTS

Service to parents focused primarily on providing information and support. Conferences were planned and implemented with workshops on PL 94-142, the Parent/Professional Partnership, Low Vision Assessment, Transition to Public School, and several others designed to assist families in identifying services. More than 2,600 pieces of materials were disseminated throughout the country regarding parenting concerns and the availability of Project Outreach as a resource center.

Direct parent-to-parent support was another key service. At times this took place over the telephone, in person during workshops, and by correspondence. In many instances the families expressed the concern that there seemed to be nowhere else locally to turn for assistance. Frequently parents offered to be supportive persons for other families with similar difficulties. Thus, networking families grew to be an effective service.

The emergence of the Massachusetts support group for families of preschool blind and visually impaired children was another important outcome of the project. Monthly meetings were held for the purpose of support and information sharing. Requests for speakers at Lions Clubs, media events and inservice workshops were often discussed and delegated. Parents who in the recent past were grieving the loss of the "perfect" child, grew to become effective speakers and advocates on behalf of their children.

Finally, parents undertook with the support of Project Outreach, US.A. staff the identification, compilation, and dissemination of resources available to young blind and visually impaired children and their families. The Massachusetts Parent Resource Manual, "Off to a Good Start" was completed during the course of this one year grant period. The Manual has met with great appreciation by parents and the professionals in the state who are now using it to locate services for their families. (Appendix F)

SERVICES TO PROFESSIONALS

Project Outreach, U.S.A., as part of the International Institute for Visually Impaired, 0-7, Inc., is the only agency both locally and nationally that serves as a resource center to provide information, materials, consultation and media regarding the development of birth to seven year old blind and visually impaired children. As soon as notices announcing the existence of Project Outreach, U.S.A. were distributed, requests for assistance were received from almost every state and the United State's territories. These requests varied from asking Project Outreach staff to evaluate specific programs, conduct workshops, meet with parents or parent groups, and send materials regarding how to teach young blind and visually impaired children, where to obtain local services for these children, to requests for media resources. The most frequent topics about which professionals requested information were:

How do you work with parents?
How do you assess young visually impaired or blind children?
How do you establish a quality program for these children?

All of the Project's materials and workshops addressed these topics in addition to a variety of others relating to the development of young blind children.

Over 250 professionals were directly served by Project Outreach staff. Contact with these professionals occurred via workshops, individual meetings, phone contacts, and letters. Among those who requested assistance from the Project staff were teachers, social workers, program directors, speech therapists, nurses, aides, early childhood teachers and consultants, occupational therapists, physical therapists, administrators, and physicians. Not only did the Outreach staff provide assistance to these professionals, but the professionals in turn helped to increase the knowledge and skills of the Project staff. This was accomplished by field testing materials, sharing with the project staff materials they found useful, and during workshops, offering additional information and resources to those in attendance. Everyone came together not only to increase their own skills, but also to share with each other ways in which blind babies can be taught to learn to live in a world they cannot see.

MODEL DEMONSTRATION SITE

The Model Demonstration Site for Project Outreach, U.S.A. is the Infant-Toddler Program at the Perkins School for the Blind. Meetings for coordination took place between the staffs every other week. During these meetings arrangements were made for visitors; inservices being conducted by each staff were discussed; parent meetings and workshop dates were coordinated; and information regarding new families was shared.

Since September, 1983, 25 visitors including parents, social workers, preschool teachers of the visually impaired, early childhood educators, speech pathologists, psychologists, itinerant teachers of the visually impaired, and teacher trainees from the Perkins training program have observed the Monday morning School Day Program. Visitors received copies of the draft materials that are being field tested by Project Outreach, U.S.A. and were requested to complete an Observer's Questionnaire.

Visitors to the Infant-Toddler Program have come from within Massachusetts, as near as Maine, New York, and Rhode Island, and as far away as Nova Scotia, Finland and Hong Kong. Some of the visitors have come to observe how the staff works with parents as the primary teachers of these children. The parents of the children in the program have welcomed these visitors and enthusiastically explained how they work with the staff in designing the space, their child's program and the parent group meetings.

HISTORY OF THE MODEL DEMONSTRATION PROGRAM (as developed between 1979 and 1983)

In September, 1980 the Perkins School for the Blind, Watertown, Massachusetts, received a grant from the Handicapped Children's Early Education Program for a Model Demonstration Project to initiate and develop services for blind and visually impaired infants (0-3) and their families. Prior to the funding of this program, the Perkins School for the Blind had no services for this age child.

The Program consists of four major components:

1. Home teaching for infants 0-3, and their families (once per week)
2. A center-based program three times a month
    a. Infant-Toddler Program (four times a month)
    b. Parent Program (four times a month - days; one a month - evenings)
3. Transition service provided for three months for entrance into programs at age three
4. Cooperative and coordinated activities on an ongoing basis with local and state medical centers and organizations and public health programs.

The program served nineteen blind and visually impaired infants ages birth to three years and their parents or principle caregivers. Teachers trained at the Master Degree level to teach blind and visually impaired and multiply handicapped children utilize and share special techniques and adapted materials with parents while on home visits and also at the Program site.

The Program provided a weekly home teaching program for a minimum of one hour stressing parental involvement, which ensured that teachers work closely with families within the parameters of the home. Since each home is different and each family unit has specific concerns regarding their blind infant, the teachers offered a "life learning" curriculum that focuses on the individual needs of the child at home. Parents and teachers coordinated their efforts to create learning activities which assisted the child's overall development. Areas of concentration included the development of fine motor skills, cognitive growth, language, physical development,self-help skills, sensory skills and areas of social-personal development. Additional components of the curriculum included vision training and visual motor activities to assist infants in learning to use any residual vision. Focus was always placed on the integration of all the senses.

Each child's progress was continually measured through the use of informal observation and formal assessments. The formal assessments included the Maxfield-Bucholz Social Maturity Scale, GUIDE, the Oregon Project for Visually Impaired and Blind Preschool Children, and the Nisonger Curriculum. This assessment data was collected and analyzed to assure that children benefited from the program.,

Teachers combined their written goals and objectives with recommendations of program consultants who worked jointly with the staff. The consultants included an audiologist, speech therapist, physical therapist, psychologist and an occupational therapist. Provision was made for consultants to make home visits to further assist the parent and teacher in the child's program planning at home. Home visiting took place during daytime or evening hours, at a time which was most convenient for parents and other caregivers, including babysitters.

Parents were intimately involved in determining the goals and objectives for their children. In consultation with the home teacher parents planned the activities to be carried out during the week to meet specific learning objectives, spanning all areas of their child's development. In addition, teachers encouraged parents to create home-made learning games or materials that they could take pride in sharing with their child.

Families met at the Program site for a formal, two hour "School Day" three times a month on Mondays. On "School Days" teachers and consultants worked individually and in small groups with the infants and toddlers, while the social worker coordinated a supportive program for the parent group. Parents determined the discussion topics that were most useful in meeting their needs. The Monday sessions for the parents may have included a speaker, viewing of video tapes, sharing of recent conferences on early intervention, or a creative craft session where tactile learning toys were created for the children.

To accomodate the expressed need of parents, open discussion meetings were planned so the parents could air their views about individual corcerns. Because of the unique needs of blind children and the low incidence of this handicap, parents welcome the opportunity to compare, commisserate, rejoice, grieve and share.

Another component of the Perkins Infant-Toddler Program was the monthly evening parent meetings which further facilitated the participation of both parents. As the daytime parent meetings, the topics discussed were decided upon by the parents.

Parents often hosted out-of-state families with visually impaired infants who were in Boston for medical treatment. These visits have included a luncheon as well as program observation. This benefited the visitng family as well as program parents, as they exchanged information about their services.

While parents met at the center-base, the children were divided into two groups. During an hour-and-a -half time period, teachers worked with the children in an area furnished as an efficiency apartment that has a home-like atmosphere. This home-like setting includes a kitchen, dining area, and a living room. The infants and toddlers were provided opportunities for both individual and group socialization, visual-motor activities, parallel play, physical therapy when recommended, auditory evaluation and training and speech and language therapy.

The goal of the "School Day" program was to supplement the home-based programming with enriching educational and social activities as well as a time for teachers and support personnel to observe, assess and work with the children to better plan for home teaching.

An important adjunct to the direct services provided through the home teaching and center based program was the ongoing consultant role of the teacher to the next program when children at age three are eligible for services mandated by Massachusetts Chapter 766. In addition to visiting appropriate local programs for which the child is eligible with the parents, the teacher served as the transition agent for the child and the parents. She attended the TEAM evaluation meeting with the parents and assisted in the writing of the education plan for the child. Following this, for three months,weekly upon request, she provided consultation and assistance to the receiving program.

Home visits for the parents may have also continued during this transition period. Parents were free to continue in all activities at the center for as long as they desired. This service offered support for the parents and assured a smooth transition of program and service so that the child was provided a continuum of service appropriate to his development.

This transition support service has been greatly appreciated by other programs. It was felt that this service is crucial since the children seldom enter a program where the staff is trained or have experience in meeting the needs of a blind or visually impaired child. At this time fifteen children upon leaving the Program have been enrolled in a variety of local programs. Three are enrolled in a regular nursery school with consultant service continued by an itinerant teacher for the visually impaired, four have been enrolled in special programs, four entered the Boston Public School program for preschool visually impaired children, and four entered early intervention programs.

CHANGES IN THE MODEL DEMONSTRATION SITE PROGRAM

The Infant-Toddler program has continued to change to meet the needs of the children, parents, staff and agency. Home visits continue on a weekly basis. 282 home visits were made this year. The center-based program, "School Days", has increased from three times a month to every Monday morning, and parent meetings take place each Monday morning as well. An evening parent meeting continues to occur each month.

This year nineteen infants and toddlers were served by the Model site. The children who have entered the program are more multiply impaired than those in the program during the initial three years. Perkins School for the Blind provides specialists (physical therapists, occupational therapists, and speech therapists) for the School Day Program. These therapists work directly with the teachers and the children, while the parents attend the support group meeting. Presently, the children are grouped according to their developmental needs. The multiply handicapped blind children are in one group and the singularly impaired children are in another. All children and parents continue to join together in opening and closing circle times.

TRAINEES

The model site has been utilized for training purposes. The State of Maine sent their newly hired Preschool Coordinator to the Model Demonstration Site for inservice training. Boston College, University of Colorado, Wheelock College and Lesley College have placed student teachers at the model site. At present one intern provides home teaching for a Puerto Rican family in Cambridge under the supervision of project staff.

RESEARCH AND ASSESSMENT ACTIVITIES

The Perkins Infant Toddler Program in coordination with the International Institute for Visually Impaired, 0-7, Inc., East Lansing, Michigan continues to collect information regarding the growth and development of the children at the Model Demonstration Site. Although the present data base from the past three years of the Program is small, it is hoped that the eventual inclusion of data from other programs will provide important data on the development of blind and visually impaired children.

OUTREACH TO STATE EDUCATION AGENCIES

MAINE

The State of Maine was selected as a primary site for inservice and assistance from Project Outreach,U.S.A. In September, 1983, the project staff were included as a part of Maine's opening workshop for the 1983-1984 school year. At this meeting the services of Project Outreach, U.S.A. were reviewed and plans made for two more inservices to be provided.

The State of Maine began to provide services for preschool blind and visually impaired in 1980. The State Supervisor of the Education of Blind Children Program requested the services of the Outreach project in order to improve the quality of programming to these children, many of whom are geographically isolated. The itinerant teachers themselves also experienced a sense of isolation and some expressed the need for very specific strategies to cope with problems they were encountering in a population unfamiliar to them. A needs assessment was conducted with the teachers resulting in the identification of two broad areas of concern: working with parents and providing quality programs for blind and visually impaired children, where no center-base exists for the purpose of service, training and development of skills for the teachers.

Thirty four people attended the first workshop in February, 1984, including parents, teachers, administrators, nurses, mobility instructors and educational coordinators. The topics focused on Parents as Partners, assessment tools, developing individual service plans, parent activities, and parents-the best teachers. Two products resulted from this inservice: a home curriculum written by the participants and regional plans written to establish parent networks. It is reported that over five hundred visually impaired and blind children will benefit from this inservice. Of these children, approximately one hundred are below five years of age.

Sharing of information, resources and materials continued through the year. A second workshop was held in June, 1984. Itinerant teachers from throughout the state attended this workshop which focused on development of blind children, assessing children in the home, and toys as learning tools. The opportunity to meet specific needs of the participants was greatly enhanced by providing open discussion sessions in the agenda. A great deal of concern was expressed regarding the difficulties of networking parents and diminishing isolation experienced by the children. Strategies for coping with these problems were explored.

The itinerant teachers of Maine have been exceptionally supportive of parents of preschool children. Working closely with Project Outreach, U.S.A. staff, the teachers encouraged several families to attend the first New England Regional Seminar for Preschool Blind and Visually Impaired Children held at Perkins School for the Blind. An additional result of working together with Outreach staff is the emergence of a Parent Support Group serving the greater Portland area. Itinerant teachers and administrators from the state agency for the education of blind children planned a meeting together with parents to explore the desire on the part of parents to meet. Administrators are prepared to assist with mailings, printing and other start-up activities. A group of approximately twenty five parents will be meeting on a regular basis for the purpose of mutual support and to participate in improving services for their children.

ALABAMA INSTITUTE FOR THE DEAF AND BLIND

The Alabama Institute for the Deaf and Blind decided in 1982 to expand its Parent Infant Program for the Deaf to include serving blind and visually impaired infants. The program is a home-base program. The families of the infants are visited by a Parent Advisor on a regular basis. The majority of the parent advisors, although professionally trained in other disabilities, were not familiar with or trained to work with the blind or visually impaired infant. Recognizing that blind babies have unique needs differing from other disabled children, the administrators invited the staff of Project Outreach, U.S.A. to begin training parent advisors in this area.

Upon completion of a needs assessment with the administrators, lead parent advisors and parents, it was decided that ongoing inservices would take place, assuming Project Outreach, U.S.A. continues to be funded.

Forty two professionals attended the two day workshop conducted in February, 1984 including administrators, an optometrist, parent advisors, teachers, vocational rehabilitation counselors, the director of the University of Alabama Low Vision Clinic, occupational therapists, psychologists, and lead parent advisors.

The focus of the workshop centered upon developing a quality program for blind and visually impaired young children. The important issue of parents and professionals working together as partners was emphasized. For some of the participants this was the first time they realized how critical it is to involve parents in all areas of planning and implementing the children's programs. An Alabama Home Curriculum was developed by the participants during the workshop.

It is reported that over six hundred visually impaired and blind preschool children will benefit from the training these professionals received. Discussion is also underway regarding the development of a center-base program for young blind and visually impaired children.

OUTREACH TO PARENT GROUPS

MASSACHUSETTS GROUP FOR PARENTS OF PRESCHOOL BLIND AND VISUALLY IMPAIRED PRESCHOOL CHILDREN

The Early Years Education and Support Group (EYES), the State of Massachusetts group for parents of preschool blind and visually impaired children was established during the summer of 1983 to provide an opportunity for mutual support and sharing. Even in Massachusetts, a state rich in human resources, services for young blind and visually impaired children and their families are few and far between. While services for adults may be defined and somewhat in place, blind infants have been overlooked for the most part. Time and time again families indicated that they really did not know where to turn for help. Parents often reported feelings of severe isolation.

Monthly meetings of the EYES group have been held. Initially, the group meetings focused on developing the Parent Resource Manual, "Off to a Good Start!", a listing of services available to parents of young visually impaired children. This manual has been widely disseminated in Massachusetts and has also been requested by many social service providers and parents outside the state.

The parent group's second project was to conduct a first Massachusetts statewide parent conference. Childcare was provided by students in the Boston University School of Occupational Therapy and other students under their supervision. Over sixty parents attended the conference, bringing with them approximately twenty five children. A number of professionals also attended the sessions. For many parents the day marked the first time their children have been left in others' care. (Appendix F)

Project Outreach staff and consultants co-led each session during the conference together with other parents of EYES group. Topics concerned the need to obtain services as soon as the child's eye condition is diagnosed, the importance of early intervention, parent pariticipation in the education planning process (CORE evaluations), and making toys for children. At the conclusion of the day, parents met in small groups to continue discussion on the need to meet in various geographic regions of the state for the purpose of support. The Massachusetts parents continued to meet as a single unit. No separate geographic group developed.

A beginning network of parents is growing and addressing the issue of isolation. A number of parents have been introduced to one another based on similarity in diagnoses of the children's often rare eye conditions (e.g. ocular albinism, iritis). At other times parents share with each other about specific interests or resources (e.g. gymnastics for preschool children).

The parent coordinator and other project staff assisted the EYES group in establishing linkages with other agencies most notably the Massachusetts Commission for the Blind and the Itinerant Teachers Talk Groups, which serve as the direct links between the EYES group and individual families. These agencies disseminated invitations to parents, whose confidentiality must be respected, on behalf of the parent group.

A vital new aspect of the parent group is family outings, where families can explore with the support of each other new recreational options. A recent trip to a beach on an early spring day gave the children opportunity to fly kites, cook out, wade in the water, build castles and even go for a ride in a fantasy rowboat fashioned out of the sand by one of the fathers.

Parents from the EYES group have also served as presenters at a number of Project Outreach inservice programs given at the Boston Public School, the Connecticut Parent Meetings, and several other sites. This has not only promoted the growth of the involved parents, helping them to become excellent advocates and giving them an opportunity to effectively share stimulating ideas and concerns with other parents and professionals, but also permitted others to grow by observing these role models.

CONNECTICUT PARENT ASSOCIATION FOR THE VISUALLY HANDICAPPED

The major collaboration between Project Outreach U.S.A. staff and the Connecticut Parent Association focused on the formation of a conference planning committee which was initiated in November of 1982, by Sherry Raynor, Porject Director, and Mary Morse, Multi-disciplinary Interagency Core Evaluation and Services (MICE) of New Hampshire. Gail Granados, President of the Connecticut Parent Association for the Visually Handicapped chaired the conference planning committee.

Meetings were held monthly at the Perkins Infant-Toddler site. Mrs. Granados' previous experience in planning parent weekend workshops with the Connecticut support group served as a model for the committee in planning a one day conference of New England Parents of preschool blind and visually impaired children.

Eventually, the planning group grew to include parents and professionals from the six New England states. Since distances were too great to travel for a planning meeting more than once a month, channels of communication were kept open by mailing minutes of the meeting and by delegating responsibilities. Each state's planners brought different skills and experiences to the process, which permitted maximal utilization of human and technical resources.

The outcome of this collaboration with Connecticut parents and Project Outreach staff along with planners from the other New England states is twofold. First, a strong, effective committee evolved which rose to the challenge of designing an interesting, stimulating day-long conference for parents. Secondly, the implementation of the plan for the conference day proved extremely successful.

Major areas of information sharing at the conference included the Parent/Professional partnership, simulation and low vision training, child/parent rights under PL 94-142 and family communications. (Appendix A)

Childcare was provided during the conference, enabling approximately 32 families to participate who might otherwise have not been able to locate babysitting. An extensive plan of activities and supervision of the children had been developed. Host families in Massachusetts provided overnight accomodations for families who traveled great distances to attend the conference.

The day was a tremendous success! All the final evaluations from the conference indicated a desire to make the workshop an annual event. One parent noted that she had learned more in one day of sharing with others than she had in all of the dealings with professionals previously. Several families found it helpful to network with others at the conference.

The planning committee has continued to meet since the conference to plan next year's seminar. New parents who received support during the conference decided to volunteer their services to the planning committee. In addition, a proposal was submitted to present the planning and implementation of the Regional Conference at CEC in April, 1985.

In summary, a strong relationship developed between the Connecticut parents and the Outreach staff. When Gail Granados was unable to chair a planning meeting, the parent coordinator was able to substitute for her because of the active communication channels between the two organizations. Project Outreach staff, in addition, provided support to parents in Connecticut at two of their parent weekends, sharing information in response to request regarding concerns with raising multiply impaired blind children.

Gail Granados and the Project's Parent Coordinator were subsequently elected to positions on the board of the National Association for Parents of Visually Impaired in part because of their leadership in implementing this conference.

SOUTH CAROLINA COMMISSION FOR THE BLIND

Initially, the Project Director and Parent Coordinator met with the staff at the Commission to discuss their needs regarding serving very young blind and visually impaired children. During an informal five hour session, including lunch, many different areas were explored including home teaching and assessment instruments. In addition, the importance of supporting parents so that they may become their children's best teachers was strongly stressed.

The remainder of the sessions involved direct support to parents and special efforts were made to answer specific questions. "Move It", I.I.V.I.'s video of a capable blind preschooler provided an excellent spring board for discussions about teaching children in the home. The South Carolina Parents' "Home Curriculum" was developed and many good ideas for learning activities came from the parents. Several handouts with further ideas for parents were handed out.

A special exercise - "Activities I enjoy doing with my child which has enabled him to learn new things" was tried. Parents were given five minutes to write down an activity they do with their children. These ideas were then compiled and made into a little Parent Booklet which was then sent to South Carolina to be distributed to the parents. (See Appendix F, for an example) A total of six staff and 27 parents attended the workshops. The Project staff also met most of the children and shared many informal hours talking with the parents.

NEW HAMPSHIRE EDUCATIONAL SERIES FOR THE VISUALLY HANDICAPPED

In coordination with the Adaptive Environments Center (AEC) in Boston, the parent coordinator and AEC consultant to the Project, Sue Crones, conducted a four hour session primarily for parents of preschool visually impaired children and the staff that works with these children.

The slide show "What Is An Adaptive Environment" was viewed. The design cycle and techniques for assessing the child's environments was shared. Parents and educators experienced a number of first hand activities which enabled them to better understand their children's needs.

Utilizing the vision simulation kit, parents attempted to make sandwiches and pour milk while wearing optical aids simulating their child's eye condition. They also were guided through a "living room" which was set up at the conference site - moving about as their children (for the most part in the crawl position) to permit the parent to "role play" their preschooler and feel some of the frustrations the child experiences while trying to get around a crowded room.

The model demonstration slides were discussed at some length, as a number of design ideas specifically assisted the very young blind and visually impaired child. Opportunity was made for parents to discuss individual problems they were having in their own homes. One parent focussed on the needs of the multiply handicapped child. The gathering was small (3 parents and 5 teacher) which permitted more direct support than might have been possible if the group had been larger.

OUTREACH TO BOSTON PUBLIC SCHOOLS

The Vision Resource Services of the Boston Public Schools began servicing young blind and visually impaired children (three to six years old) in 1982. The staff from Project Outreach, U.S.A. was invited to conduct three workshops as part of the regularly scheduled inservice meetings for the vision teachers of the Boston Public Schools during the 1983-84 school year. After conducting a needs assessment with the vision teachers, the following topics were chosen: Adaptive Environments; Assessment and Curriculum; and Toys.

Fifteen professionals attended the Adaptive Environments workshop: administrators, social worker, vision teachers and peripatologists. Although very few of the teachers teach in a typical classroom setting, most of them stated that they found the information presented to be useful to them. (Appendix D) This workshop was conducted by the Parent Coordinator, the Adaptive Environment Consultant and the Education Coordinator of Project Outreach, U.S.A.

The second workshop with Boston Public School Vision Resource Teachers was on Assessment and Curriculum for the preschool blind and visually impaired child. The Education Coordinator and a mother of a 5 year old visually impaired son conducted the workshop. Eleven professionals from the Vision Resource Services attended this workshop. Many of the participants were introduced to up-to-date assessment tools as well as discovering that there are very few assessment tools that alone are appropriate for use with young blind and visually impaired children. Once again the participants stated that the workshop helped to increase their professional knowledge. (Appendix D)

The final workshop topic was "Toys". Again the Education Coordinator and the mother of the visually impaired son conducted the workshop. This workshop was a totally visual experience - toys and materials appropriate for use with young blind and visually impaired children were displayed and their use discussed. The majority of the participants stated that the workshop was very helpful. (Appendix D)

As a result of these workshops, 122 blind and visually impaired children will be indirectly served.

OUTREACH TO EARLY INTERVENTION PROGRAMS

ORANGE COUNTY CEREBRAL PALSY ASSOCIATION, INC.

This workshop was a direct result of a visit to the model demonstration site and to Project Outreach, U.S.A. by a social worker from the New York Commission for the Blind. The numbers of visually impaired or blind preschool children have recently increased in the Orange County area and the social worker was concerned that these children were scattered throughout the area and being serviced by generic programs. Upon returning to her agency, she contacted the Orange County Cerebral Palsy Association, Inc. regarding the need for staff training, arrangements were made for a two day workshop.

The agenda was decided upon by Project staff (the Education Coordinator and Speech Consultant), the Program Director of the Orange County Cerebral Palsy Association, Inc. and the social worker from the New York Commission. The topics choosen were: "Parents the Best Teachers", "Visual Impairments and Their Educational Consequences", "Development of Blind Children", "Language Development", "Assessment - Goals - Weekly Activities", "Activities for Blind Children", "Modifying and Adapting the Environment". (Appendix D)

Parents, teachers,speech therapists, classroom aides, occupational therapists, physical therapists, rehabilitation counselors, children's consultants from the N.Y. Commission, teachers of the deaf, supervisors and program coordinators attended the two day workshop. Altogether 40 people attended at least a portion of the workshop, with the majority attending both days. The summary evaluations show that the vast majority of participants reported that the sessions were very helpful. (Appendix D)

As a result of the two days of meetings with all of these individuals, two important decisions were reached: the parents, who participated, decided to organize a support group and network with other parents of preschool visually impaired or blind children in their region; and, the preschool visually impaired and blind children, who are presently being serviced in various programs throughout the county, may be brought together into a central classroom. Due to the variety of professionals who attended the workshop, 1,800 visually impaired or blind children will receive improved services.

THOM MONTESSORI PRESCHOOL, BOSTON

This formal presentation on mainstreaming a blind child into a preschool setting was the culmination of eight months of informal support given by the Parent Coordinator and others of the Project staff who had consulted with the Montessori Preschool Coordinator. All seven staff members who work in the preschool attended the presentation, (One staff member could not attend due to illness) This absence was significant in that this person was a primary teacher of the blind child. To help in overcoming the situation, the session was recorded for the teacher.

"Move It" a short video, was shown to stimulate discussion regarding the need for having high expectations of the blind child and expecting age appropriate behaviors and self help skills. The staff of the preschool had an opportunity to reflect on how much their efforts had enabled the three year old to become more independent, to develop fine motor and gross motor skills, and to begin to establish meaningful relationships with her peers.

Further, Project Outreach staff members were given an opportunity to directly acknowledge the unusual commitment the Montessori staff had made to this, their only special needs child. Specific feedback regarding observations the Education Coordinator had made while visiting the school were shared. In particular, the staff's verbalizing expectations to the child and adapting teaching skills to meet her needs were underscored.

In addition, "Teaching With Materials From The Home", a listing of exploratory activities young children enjoy was discussed. The need to focus on specific activities of daily living was also stressed.

The Parent Coordinator met with the Montessori staff at least once per month to explore problems and possible solutions before the problems became overwhelming. This Montessori program has committed itself to serving this blind preschool student again next year. They look forward to ongoing support from the Project staff to best meet her needs for learning and their need to adapt teaching methods.

DORCHESTER EARLY INTERVENTION PROGRAM

This workshop was conducted for the staff of the Dorchester Early Intervention Program. This program is funded by the Massachusetts Department of Public Health to service birth to three year old developmentally delayed children. Some of the children served by the program also have visual impairments.

The Education Coordinator, the Parent Coordinator and Mary Keefe, a consultant to the Project, presented the topic, "Development of Blind Children". Nine staff members attended the workshop, including the consulting doctor, social worker, teachers, speech therapist, program director and physical therapist. Two children in this program have been diagnosed as legally blind, therefore, many of the questions the staff had were directly related to these children's needs.

Of the nine participants at the workshop, five responded to the workshop evaluation. The results show that their needs were met to a high degree. (Appendix D)

As a direct result of this workshop, the families of the legally blind children have received home visits from Project Outreach staff. These visits have been mainly centered on the services available to the families in the Greater Boston area as well as suggestions of activities that would help in the child's development.

NEW ENGLAND RESOURCE ACCESS PROJECT

The Head Start Programs in Western Massachusetts have experienced a dramatic increase in the number of visually impaired children. In previous years, this region normally had one or two partially sighted preschoolers, now the region has identified sixteen legally blind children. These children have significant loss of sight including several who are totally blind. Joanne Brady from New England Resource Access Project (RAP), who is also a member of Project Outreach's Advisory Council, approached the Project regarding working with the Head Start staffs to provide them with more background information to assist them in teaching these young children.

A one and a half hour session was presented which focused on the types of visual impairments most frequently found in children and their educational consequences for learning. A number of practical suggestions were given on how to adapt the curriculum and environment to meet the needs of a child with a visual impairment. Several specific activities were suggested to help stimulate vision for the low vision children.

Twenty-three attended this session. Among the participants were public health nurses, administrators and Head Start teachers. Joanne Brady reported back from her evaluations that the participants felt they had been given many very useful ideas and that the Project had assisted them with a number of specific problem areas.

KENNEDY-DONOVAN CENTER

This workshop was conducted for the combined staffs from the Kennedy-Donovan Centers for Programs in Early Development of Ashland and Hopedale, MA. These centers serve developmentally delayed, multi-impaired or at-risk infants from birth to three years old. Some of their children have severe visual losses. A workshop was requested for the staffs and a needs assessment was completed by all staff members. The Education Coordinator and the Parent Coordinator met with the staffs to discuss the development of blind children andto answer specific questions regarding the progress of the visually impaired children in their programs.

The team leaders, nurses, speech pathologist, physical therapist, teacher assistant, and social worker attended the workshop. All attendees completed the inservice evaluation. The majority found that their needs were successfully met. (See Appendix D)

As a result of this workshop, the staff of Project Outreach was asked to return in the Fall (1984) to provide a series of workshops for both the professionals and parents. It was felt that further workshops would enhance the centers' services to visually impaired children.

OUTREACH TO OTHERS

SOUTH CENTRAL TALK GROUP OF TEACHER-CONSULTANTS OF THE VISUALLY IMPAIRED

Susan Stager, talk group leader for the itinerant teachers of Central Massachusetts, requested that Project staff attend a support group meeting to tell them about the work of the Project and to assist them with ideas for ways to involve parents more in the education of their children and in lending one another mutual support.

Three itinerant teachers, a Commission for the Blind representative, an administrator from the Blackstone Valley Collaborative and the librarian from the Vision Resource Library met with the Education Coordinator and the Parent Coordinator of Project Outreach. The meeting focused on their concerns regarding the difficulties in getting a parent group underway. A number of strategies were shared. Plans for the New England Parent Conference were outlined and the Project staff assisted in networking the Talk Group members with the vision consultant at the University of Massachusetts Developmental Evaluation Clinic who may be able to provide ongoing support for visually impaired preschoolers, their parents and teachers.

As a result of this meeting, the teachers felt that they had a better idea of which individuals were available to them for consultation regarding the needs of the preschool visually impaired children. Most of these teacher were not trained to work with this age group and found it helpful to know that they have knowledgable people to turn to at the Project.

ASSOCIATION FOR RETARDED CITIZENS

In coordination with the Adaptive Environments Center, an agency committed to improving access for all handicapped individuals, a two hour presentation was made during the Massachusetts Association for Retarded Citizens (MARC) annual meeting. The meeting was entitled, "A Family Reunion". The Perkins slide show including a home adaptation was shared with the group with preschool interests as well as the adaptive environment design cycle.

For the most part, those who attended the presentation were professionals: a housing specialist from the Heller School at Brandeis, the Executive Director of MARC and others. One parent of a twenty year old who is becoming rapidly non-ambulatory, was given support and suggestions for making changes in his home. The group felt the presentations had been effective in that it obviously benefitted this parent.

REHABILITATION ENGINEERING SOCIETY OF NORTH AMERICA

The director and founder of the Adaptive Environments Center and the Parent Coordinator of Project Outreach co-presented a one day workshop detailing the user-need design process for a group of 30 professionals attending the International Conference of the Rehabilitation Engineering Society. The group consisted of a number of occupational therapists, social service administrators, engineers, and others concerned with making environments accessible to all people.

The morning session focused on the design process (observation, assessment, planning). In the afternoon participants built actual models of a program for an adult day care center. Most participants found this "hands-on" experience useful in considering the needs in their own settings. Some engineers wanted more information on the state-of-the-art technical innovations in adapting spaces for handicapped individuals. This feedback will be useful in planning future workshops with this group.

LIAISON ACTIVITIES

INSERVICE TRAINING FOR STAFF

Inservice training for Project staff of visually impaired infants and toddlers has always been difficult to provide since there are few resources available specific to this area of disability. This staff is faced with the task of developing as a resource. Nevertheless, inservice continued to be provided on both a formal and informal basis. Visitors to the Project who came seeking information were also used as a resource to gain information for the staff. In addition, Project Outreach staff received from participants at workshops resources, materials, and an opportunity for an exchange of ideas. The staff found host agencies to be extremely generous and open in sharing information.

Formal inservice meetings included:

January 26, February 16, March 15, April 26, 1984 Education Coordinator	Administrative Training Workshops for Early Intervention & Early Childhood Leaders
November 5, 1983 All Staff	Early Years Education and Support Group Conference
March 26 - 30, 1984 All Staff	GUIDE Workshop, Davidjohn Stosich, Boston, MA
April 6, 1984 Parent Coordinator	F.I.R.S.T. Parent Workshop, Braintree, MA
April 7, 1984 All Staff	New England Regional Seminar for Families of Visually Impaired Children, Ages 0-7, Watertown, MA

April 19-20, 1984 Project Director Parent Coordinator	Early Intervention Consortium, University of Massachusetts, Worcester, Massachusetts

Informal inservice training occurred at weekly staff meetings and in sharing articles and other materials from the Model Demonstration site at the Perkins Infant-Toddler Program. Mr. Kenneth Stuckey, Research Librarian at Perkins School, was very helpful in providing articles used for inservice workshops and staff training.

LINKAGES

Project Outreach, U.S.A. has held 3 Advisory Council meetings since September, 1983. There are 31 Advisory Council members, including parents of preschool blind children, staff and representatives from the following agencies:

- Boston Public Schools
- Boston Center for Blind Children
- University of Massachusetts Hospital
- Boston College
- State Department of Education
- Department of Public Health
- Department of Mental Health
- Massachusetts Commission for the Blind
- New Hampshire Division of Public Health
- Church Representation
- New England RAPS (Headstart)
- Vision Foundation, Inc.
- Research Psychologist
- Early Childhood Representative
- Perkins School for the Blind
- Eye Research Institute of Retina Foundation

Some of the liaison activities carried out with these agencies include:

All agencies contacted programs in need of training in working with young blind or visually impaired children.

University of Massachusetts Hospital shared resources and expertise for conferences.

Boston Public School utilized Project staff for inservice training for their teachers and continued to work with Project staff in expand their program to serve birth to 3.

EDC/RAPS shared resources, identified children in need of service and coordinated workshops with Project staff.

Vision Foundation referred families in search of help to Project staff for direct support.

Eye Research Institute continued to work with Project staff to make available to the medical community the awareness materials regarding early referrals.

Department of Public Health and The Department of Mental Health conducted surveys to try to find out the numbers of young blind and visually impaired children.

New Hampshire Division of Public Health helped in contacting local agencies in need of inservice training as well as was a major supporter of the New England Regional Seminar.

FIELD TESTING

Project Outreach, U.S.A. has continued to refine the materials designed during the three years of the Perkins Infant-Toddler Project. The following materials were available for field-testing: Home Teaching Notebook; Curriculum And Assessment Instruments; Home (why home-like environments); Developing an Individualized Service Plan; Toys and Materials; Center Base Program Overview; Parent Evaluation Form and Procedure (questionnaire regarding program effectiveness); and Parent Activities.

All observers at the model demonstration site received copies of the first drafts of the materials. In addition, parents and professionals who contacted Project Outreach, U.S.A. either directly, by letter or by telephone received the items if they wished to field test them. When the materials are sent out, a Material Evaluation Questionnaire was attached, to be used by the field tester. (Appendix A)

The following materials were sent out to various individuals for field testing:

Number	Title
85	Home Teaching
84	Curriculum and Assessment Instruments
106	HOME
83	Developing an Individualized Service Plan
32	Toys and Materials
6	Center Base Program Overview
11	Parent Evaluation Form and Procedure
83	Parent Activities
490	TOTAL

All responses were reviewed by Project Outreach staff and appropriate changes have been implemented.

AWARENESS

The Project Director and the Parent Coordinator have made presentations about the needs and capabilities of young blind and visually impaired children to numerous service clubs throughout the Commonwealth.

A cable TV show, "Jessica, Jonathan and Heidi..." was produced by the media specialist to create an awareness among the general public for the needs of early services for young blind and visually impaired children. The program portrays young blind and visually impaired children learning in their homes, being taught by their parents, their first and best teachers. The 30 minute show has been aired a number of times on Newton and Watertown cable and will be used by other cable networks in this region.

The International Institute for Visually Impaired, 0-7, Inc. (IIVI) as part of its services and awareness activities has written numerous articles and newsreleases. For example: The VIP Newsletter (Vol. 3 #2) carried an article re: Project Outreach, U.S.A.'s services. The VIP is distributed to over 1,000 individuals or agencies worldwide. In the Fall Bulletin, IIVI included a newrelease regarding the Project. The bulletin was sent to over 10,000 individuals and was included in the most recent edition of the VIP. (Appendix F)

In addition, the Project distributed over 300 letters describing the services offered by the Project to state directors of special education, all agencies serving young visually impaired and blind children, local early childhood programs, HCEEP directors and individual parents or parent groups. Letters and phone calls continue to come in requesting inservice programs even though the Project has ended.

Mass media has been utilized by the staff to inform the general public and early identifiers of the services of Project Outreach and the needs of infant and toddlers who are blin or visually impaired. To date, newsreleases or articles have appeared in newspapers in the Greater Boston area, outside Greater Boston, the New England Region and in the state of Alabama. (Appendix A). The Parent Coordinator and the Education Coordinator participated in a talk show produced by WRKO radio regarding the needs of this low incidence population and their families. The host of the show, Roger Allan, has since become a strong supporter for the needs of young blind children

Pamphlets, articles, flyers, parent packets, brochures, bulletins etc. have been sent to hundreds of individuals requesting information on how to work with the young blind and visually impaired child.

SPIN-OFFS

A number of additional activities and projects have occurred during the past year due to the involvement of Project Outreach staff. Among these are:

Activity Booklet: During the workshop conducted by Project Outreach and the South Carolina Commission for the Blind, an activity book was developed by the South Corolina parents and the Parent Coordinator. The activity book is a useful, practical booklet of activities for young blind or visually impaired children. Each parent listed one or two activities that their child has learned to do because of the parents intervention. Project Outreach organized the activites, assembled them into an actractive format and had the booklet illustrated. In producting this booklet, Project Outreach again reiterated its belief that parents are the best teachers of their children.

Translations: A student intern with Project Outreach, U.S.A. who is a certified teacher in Puerto Rico, has translated a number of materials utilized by both the Project and the Model Demonstration site. These materials have been used by a family in the Perkins Infant-Toddler Program who has found them to be extremely helpful.

Assessment Film: During the course of developing the model demonstration program, as well as while implementing Project Outreach activities, it became apparent that educators, parents, and students need to learn how to assess very young blind and visually impaired children. A teacher from the FLAAC Collaborative, who works with the graduate program at Boston College, brainstormed with the Education

Coordinator regarding this need. A decision was made that the Institute (IIVI) and FLAAC would create a video tape on assessing young visually impaired children. The first print of the assessment tape entitled, "Jennifer and Amy" is presently being field-tested.

GUIDE: Within the area of education of the young blind or visually impaired child, there is a tremendous need for a curriculum or developmental checklist for the individuals who work with these young children. This need was reiterated time after time during the "Assessment and Curriculum" sessions of the Project's workshops.

One of the developmental scales utilized by the Project and the staff at the Model Demonstration site is GUIDE. This is a computerized version of the scale that was formerly known as Vision-Up. As computers become a larger influence in the educational arena, the need for a useable, reliable computerized scale becomes more critical.

In March, 1984, a workshop to explore the use of GUIDE as an assessment and curriculum instrument for blind and visually impaired young children was hosted by Project Outreach in cooperation with the Boston Public Schools. Professionals from four agencies serving young blind and visually impaired children came together to learn to use the computerized form of Vision-Up (GUIDE) as well as to discuss improving and modifying it. As a result of this workshop, it was decided that this group will continue to work on these changes.

STATEMENT OF PROJECT IMPACT

Project Outreach, U.S.A. was funded to focus on developing programs and services similar to the Perkins Infant-Toddler Program for blind and visually impaired children, birth-3, and improving the quality of current programs and services for this same group of disabled children. These activities were met through consultation, inservice programs, material development and dissemination. The Model Demonstration Program at the Perkins School for the Blind was utilized as the demonstration site and base for these activities. The Project continued to expand the work with parents of these disabled infants as well as impacting upon various early identifier groups (health, education and welfare agents/agencies) through the development of media, materials, inservice and consultation to broaden awareness relative to the impact of vision impairment on the growth, development and learning of these children.

The impact of these activities resulted in an increase in the number of programs available to serve these children and their parents, an improvement in the quality of current programming for these children and their parents, improved knowledge and skills on the part of parents of these children and increased knowledge on the part of early identifiers of these children resulting in increased early referrals to early intervention programs.

There has been an increase in the numbers of programs developing to serve blind and visually impaired young children in Maine, Alabama, Kansas, North Carolina and South Carolina directly related to previous activities of the Institute which prompted the writing of this grant. On-going inservice was provided this year and would have been provided to these sites on a continuum for at least the next two years had funding not been terminated. It has been shown that it takes more than one year to develop excellence of service for children and parents.

There is also an increased recognition of the need for services specific to blind and visually impaired children and their parents. This in turn led to inquires for inservice from more than 50% of the states. However, since these agencies needed a year or more to plan and find funds for inservice we were not able to provide direct assistance through this Project.

The Commonwealth of Massachusetts as well as the other sites have all seen an increase in identified numbers of children and all have task forces to increase earlier identification of children. This in turn has caused problems for some areas because there is not funding for services specific to blind children nor trained staff to work with them (i.e. the Model Demonstration Site has a waiting list at this time and is also looking for a teacher).

One very positive outcome since the Project ended has been an increase in the number of doctors requesting information and assistance for parents.

In conclusion, it is felt that the Project staff accomplished an almost unbelievable amount of work for a first year Outreach

Project. The lack of continued funding for the increasing underserved and unserved population of blind and visually impaired preschool children in this country is indicative of a lack of sensitivity at the federal level for continuation funding for experienced projects. Program development and material development cannot be accomplished in one year nor can reliable data be collected if adequate resources (Federal Projects) are not developed to assist agencies in the provisions of services for parents, teachers and other professionals.

It is significant that the reported numbers show that this Outreach Project, in one year, had an impact on:

2500+	visually impaired and blind young children (indirectly served)
326	parents served (directly)
4000+	parents served (indirectly)
9	parent groups served
250+	professionals served
20,000+	materials distributed

APPENDIX A

PROJECT OUTREACH U.S.A.

GOAL I. TO ASSIST AND ENCOURAGE THE DEVELOPMENT OF SIMILAR PROGRAMS FOR CHILDREN WHO ARE BLIND AND HAVE VISUAL IMPAIRMENT (BIRTH - THREE)

Log 1

DATE	REQUEST (Person/Agency)	Appropriate	Non-Appropriate	Referral to Agency	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of children served (Indirectly)
9/8/83	David P. Dorr State Supervisor, SPED of Blind Chn, Maine	*				*					24	
	Sandra Gubacz Aroostook Itinerant Teacher, Maine	*						*			1	
	Dorreen McCann Preschool Counselor Maine	*						*			1	97
10/24/84	Linda Leo Itinerant Teacher, ME	*			*		*		*	*	1	
	Ellen Morrison Itinerant Teacher, ME	*			*		*				1	
	Parent & child, ME	*			*		*				1	1
10/10/84	AASB, Atlanta, Georgia	*						*	*			
11/29-12/1	AL School for the Deaf & Blind, AL	*				*			*			67
12/7/83	Frank Sconiers, State Dept. of Ed., AL	*								*		516
12/11-15	HCEEP Directors' Mtg Washington, D.C.	*						*			50	
1/11/84	Mariana Islands	*			*			*	*			
1/24/84	VT Assoc. for the Blind	*			*			*	*			
	TOTAL	11			5	2	3	6	5	2	79	681

PROJECT OUTREACH U.S.A.

GOAL I. TO ASSIST AND ENCOURAGE THE DEVELOPMENT OF SIMILAR PROGRAMS FOR CHILDREN WHO ARE BLIND AND HAVE VISUAL IMPAIRMENT (BIRTH - THREE)

Log 1

DATE	REQUEST (Person/Agency)	Appropriate	Non-Appropriate	Referral to Agency	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of children served (Indirectly)
1/31/84	Dept. of Ed., Puerto Rico	*			*			*	*			
2/10-12	AL School for the Deaf & Blind	*				*		*	*	*	43	308
2/22-24	State of Maine Teachers	*				*		*	*	*	34	110
2/24/84	E. Montana College, MT	*			*			*	*			
3/16/84	Orange County CP Assoc. Goshen, NY	*			*			*	*	*	1	5
5/16-17	Orange County CP Assoc. Goshen, NY	*				*		*	*		40	1861
	TOTAL	6			3	3		6	6	3	118	2334

PROJECT OUTREACH U.S.A.

GOAL II. TO ASSIST AND ENCOURAGE IMPROVEMENT OF EXISTING PROGRAMS

Log 2

DATE	REQUEST	Consultation	Inservice	Model Site				Awareness Materials	Existing Materials	Field Test	Number of people served	Number of children served (Indirectly)	Early Childhood Group
				Number of Observers	Interns	Materials	Questionnaire						
11/4/83	Project BEAM	*		1(11/7)			*		*		6	1	*
12/13/83	Boston Public School	*										11	
12/13/83	Dorchester Early Intervention Prog.	*		2				*	*		9	4	*
9/25-30	Toronto,Canada	*						*	*		4	22	
1/6/84	Kansas	*						*	*				
1/10/84	Arkansas School for the Bl, AK	*						*	*		100families		
1/18/84	NJ State Dept.	*						*	*				
1/23/84	Region 18, TX	*						*	*				
2/2/84	RAPS		*					*	*		13	35	*
2/13/84	Boston Public Schools		*					*	*		15	12	
2/16/84	Central MA Talk Group	*						*	*		8	11	
3/19/84	NE Deaf Blind Project	*						*	*				
3/26-30	GUIDE Workshop		*					*	*		8	50	
4/5/84	Thom Montessori School, Boston		*					*	*		6	1	*
4/5/84	Les Passees,TN	*						*	*			400	
5/7/84	Boston Public		*					*	*		11	12	
	TOTAL	11	5	3			1	14	15		280	559	4

PROJECT OUTREACH U.S.A.

GOAL II. TO ASSIST AND ENCOURAGE IMPROVEMENT OF EXISTING PROGRAMS

Log 2

DATE	REQUEST	Consultation	Inservice	Model Site				Awareness Materials	Existing Materials	Field Test	Number of people served	Number of children served	Early Childhood Group
				Number of Observers	Interns	Materials	Questionnaire						
5/4-6	S.C. Commission for the Blind		*					*	*		27	32present 92preschool 400Commission	
6/20/84	Kennedy-Donovan Ctrs,MA		*					*	*		10	50+	*
TOTAL			2					2	2		37	450	1

PROJECT OUTREACH U.S.A.

GOAL III. TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF THE EFFECT OF BLINDNESS AND VISUAL IMPAIRMENT ON GROWTH, DEVELOPMENT AND LEARNING

Log 3

DATE	REQUEST	Parent Group (A) Attended Only	Professional Group (A) Attended Only	Questionnaire Sent	Information Sent	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of children served
9/9/83	Parent Resource Manual Meeting	*											
9/16/83	Parent Resource Manual Meeting	*											
9/20/83	Mtg w/Major Mann		*		*				*				
9/23/83	Parent Resource Manual Mtg	*											
9/25/83	CT Parent Group	*			*					*		3	3
9/22/83	Manual Questionnaires sent w/ brochure			403					*				
10/5/83	MA Commission for the Blind		*						250				
10/6/83	Parent Resource Manuak Mtg	*											
10/7/83	Mailing to Itinerant Teachers re: Nov. 5th Conf.								300				
10/11/83	Mailing requesting awareness material re:Nov. 5 Conf.								50				
10/13/83	Parent Resource Manual Meeting	*											
10/15/83	Parent Resource Questionnaires Mail			403									
	TOTAL	5	2	806	2				1054	1		3	3

PROJECT OUTREACH U.S.A.

GOAL III. TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF THE EFFECT OF BLINDNESS AND VISUAL IMPAIRMENT ON GROWTH, DEVELOPMENT AND LEARNING

Log 3

DATE	REQUEST	Parent Group (A) Attended Only	Professional Group (A) Attended Only	Questionnaire Sent	Information Sent	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of children served	
10/17/83	Parent Resource Manual Mtg	*												
10/18/83	AEVH Mtg re 4/7/84	*	*											
10/20/83	Parent Resource Manual Mtg	*							*					
10/21/83	Perkins School w/ ME visitors		*											
10/24/83	ME visitors@ Perkin	*						*				3	1	same as Log 1
10/27/83	Parent Group w/ Gov.Dukakis	*	*									14	7	
11/1/83	Mtg W/Principal Joyce Jr High 11/5	*												
11/1/83	Mtg PR re:11/5	*												
11/3/83	Mtg w/BU students re:11/5		*						*					
11/5/83	EYES Workshop	*	*						*	*		75	25+	
11/15/83	Video Mtg		*						*					
12/2/83	Perkins Meeting		*											
12/8/83	Montessori Staff Mtg		*						*			6	1	
12/9/83	Cable TV taped		*						*					
12/22/83	Montessori Staff M.		*						*					
12/14/83	Boston Public Sch	A												
	TOTAL	8	10						7			98	34+	

PROJECT OUTREACH U.S.A.

GOAL III. TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF THE EFFECT OF BLINDNESS AND VISUAL IMPAIRMENT ON GROWTH, DEVELOPMENT AND LEARNING

Log 3

DATE	REQUEST	Parent Group (A) Attended Only	Professional Group (A) Attended Only	Questionnaire Sent	Information Sent	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of children served
1/17/84	Home Visit Dorchester family					*			*			3	1
1/24/84	Somerville LIONS		*						*			30	1
1/25/84	Newton LIONS		*						*			12	
1/26/84	Leadership Conference		*						30	30		30	
1/26/84	EYES Support Mtg	*										12	6
2/13/84	Boston Parent Mtg	A										6	6
2/18/84	LIONS 33K Mtg		*						*			200	
2/22/84	Harvard Health Grp		*				*		*	*		11	
3/21/84	EYES Support Mtg	*										10	7
3/31/84	NH Education Series for V.H.	*	*				*					7	100
3/6/84	Parents F.I.R.S.T.	*											
4/7/84	NE Regional Parent Workshop	A	A						*			132	35
5/7/84	Boston Parent Mtg	A										4	4
6/16/84	CT Parent Mtg	*				*			*	*		4	7
6/16/84	Rehab Engineering Society of N.A. Internat'l Conf.		*				*		*			35	
6/25/84	Ayer LIONS Mtg		*						*			25	
	TOTAL	8	9			2	3		39	32		521	167

PROJECT OUTREACH U.S.A.

GOAL III. TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF THE EFFECT OF BLINDNESS AND VISUAL IMPAIRMENT ON GROWTH, DEVELOPMENT AND LEARNING

Log 4 Mass Media

CONTACT	Television	Radio	Newspaper	Other	Contact Date	Action Date	Greater Boston	Outside Boston	Outside Massachusetts	Impact +/-	
NEWS TRIBUNE			*			10/17	*				w/Mayor Mann
ZION HERALD			*			Oct	*	*	*		T.C.Article (N.E. Region)
·GLOBE CALENDAR			*			11/3	*	*			Nov. 5th workshop
GRAPHIC/TRIBUNE			*			11/8	*				Governor's Proclamation
FALL RIVER HERALD NEWS			*			11/9		*			Article on Preschool Blind
NEWTON TRANSCRIPT			*			11/17	*				Picture w/Mayor Mann
NEWTON CABLE	*					12/20 1/12 1/13					JESSICA, JONATHAN, HEIDI...
SIGHTS & SOUNDS			*			Dec			*	+	Alabama
TOTAL	1		7				5	3	2		

PROJECT OUTREACH U.S.A.

GOAL III. TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF THE EFFECT OF BLINDNESS AND VISUAL IMPAIRMENT ON GROWTH, DEVELOPMENT AND LEARNING

Log 4 Mass Media

CONTACT	Television	Radio	Newspaper	Other	Contact Date	Action Date	Greater Boston	Outside Boston	Outside Massachusetts	Impact +/-	
DAILY TIMES & CHRONICLE			*			11/4	*				Woburn re:Nov. 5th Workshop
WATERTOWN CABLE	*					2/9 2/20	*			+	JESSICA, JONATHAN, HEIDI...
SIGHTS & SOUNDS			*			Mar			*	+	Alabama
NEWTON GRAPHIC				*		5/16	*			+	Article
Radio Stations		*					*			+	Cut-A_Thon
EVENING MAGAZINE	*				Apl	Sept	*	*	*	+	Program on the needs of blind children
WRKO		*			Jun	Aug	*	*	*	+	Talk show re: needs of blind children
Newton Radio		*				Sept	*			+	Nine talk shows re: needs of blind children
EXCEPTIONAL PARENT				*		Jun	*	*	*	+	Article for parents
TOTAL	2	3	2	2			8	3	4		

PROJECT OUTREACH U.S.A.

GOAL IV. TO ESTABLISH LINKAGE AND PROVIDE ASSISTANCE FOR TRAINING PROGRAMS TO INCREASE AWARENESS OF THE UNIQUE NEEDS OF THE BLIND AND VISUALLY IMPAIRED INFANT AND YOUNG CHILD (BIRTH - THREE)

Log 5

DATE	REQUEST	Advisory Council	Professional	Non-professional	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of student interns
11/83 1/84	Boston Center for Blind Chn	*	*			*		*	*		30	
5/84	UMASS Hospital	*	*			*		*	*		1	
	Boston College	*	*			*		*	*			
	State Dept. of ED	*	*		*			*	*		8	
	DPH	*	*			*		*	*		100+	
	DMH	*	*					*	*			
	Comission f/t Blind	*	*					*	*			
	Retina Foundation	*	*		*			*	*		3	
	Project MICE	*	*					*	*		(7 children served)	
	Parents	8			*			*	*			
	Project WELCOME	*	*					*	*			
	RAPS	*	*					*	*		7	
	Vision	*	*					*	*			
	Psychologist	*	*					*	*			
	Early Chhd Rep.	*	*					*	*			
	Perkins	*	*					*	*			
	TOTAL	31	23		3	4		31	31		156+	

PROJECT OUTREACH U.S.A.

GOAL IV. TO ESTABLISH LINKAGE AND PROVIDE ASSISTANCE FOR TRAINING PROGRAMS TO INCREASE AWARENESS OF THE UNIQUE NEEDS OF THE BLIND AND VISUALLY IMPAIRED INFANT AND YOUNG CHILD (BIRTH - THREE)

Log 5

DATE	REQUEST	Advisory Council	Professional	Non-professional	Consultation	Inservice	Model Site Visit	Awareness Material	Existing Materials (Sent/Received)	Field Test	Number of people served	Number of student interns
1/25/84	Boston College					*		8			8	
1/9/84	Commission for the Blind		*		*							
1/12/84	Boston Center for Blind Chn (BC/BC)		*		*							
1/16/84	BC/BC		*		*							
2/2/84	BC/BC		*		*							
2/6/84	Commission for the Blind		*		*							
2/9/84	BC/BC		*		*							
3/2/84	Commission for the Blind		*		*							
3/5/84	Commission for the Blind		*		*							
3/24/84	NFB Conference		*	*				50				
4/19-20	Early Intervention Consortium Mtg.		*					100				
4/23-27	CEC Conference		*					50				
	TOTAL		11	1	8	1		208				

I. I. V. I.

International Institute for Visually Impaired, 0-7, Inc.
(BIRTH TO SEVEN)

We are pleased to announce that the International Institute for Visually Impaired, 0-7, Inc. has begun PROJECT OUTREACH. USA. This project has been funded for one year by the federal government to assist others in improving or beginning services for preschool blind or visually impaired children. Our target population for services will be parents, professionals, and volunteers who work with birth to three year old blind or visually impaired children.

One format we are using is site visits by knowledgeable professionals who will conduct workshops in three areas. The areas include: Working With Parents, Assessments and Curriculum, and Program Components. Inservice sessions may incorporate discussion periods, video presentations, slide-tapes, brainstorming, role playing, and handouts.

Topics for each of the areas include:

WORKING WITH PARENTS: parent support, parent activities, home teaching, record keeping, toys (homemade and commercial), speech and language, parent evaluation of program procedures.

ASSESSMENTS AND CURRICULUM: GUIDE, Maxfield-Bucholz Social Maturity Scale for Preschool Blind Children, Nisonger Curriculum, OR Project and informal functional visual assessment instruments.

PROGRAM COMPONENTS: development of an individual service plan, overview of a center-base program, ideas for an adaptation of the environment to meet your or the children's needs, methods for record keeping, liaison with a developmental evaluation team, suggestions for speech and language programs and integrated settings.

Appropriate workshop areas will be decided upon by the requesting agency. Project Outreach, USA will conduct the workshops. The staff will work with the participants to seek solutions to meet the individual needs of the group.

14 Gay Street, Newtonville, Massachusetts 02160-2213 617/527-0476

Mich MICS #8400/Mass A G Act #14502/Fed I D #38-2228033

BOARD OF TRUSTEES Sherry Raynor Donna Heiner Jackie DeNike

International Institute for Visually Impaired, 0-7, Inc.
(BIRTH TO SEVEN)

MEMORANDUM OF AGREEMENT

between

PROJECT OUTREACH, USA

INTERNATIONAL INSTITUTE FOR VISUALLY IMPAIRED, 0-7, INC.

Newtonville, Massachusetts 02160

AND

____
Sherry Raynor Date
Director
PROJECT OUTREACH, USA

____
Date

Number of Agreements enclosed _____

PROJECT OUTREACH, USA Coordinator: ______________________________

Mich MICS #9400/Mass A.G. Act #14502/Fed I.D #38-2226033

BOARD OF TRUSTEES
Sherry Raynor
President
Donna Heiner
Vice President
Jackie DeNike
Secretary/Treasurer

DRAFT
11/83

PROJECT NAME: DATE:

ADDRESS:

NEED:

TARGET:

FOCUS OF INSERVICE:

INSERVICE OBJECTIVES	ACTIVITIES	DOCUMENTATION

I. I. V. I.

International Institute for Visually Impaired, 0-7, Inc.
(BIRTH TO SEVEN)

FIELD TEST MATERIALS AVAILABLE FROM
PROJECT OUTREACH, U.S.A.

(Please check off the materials you would like to field test.)

____ Home Teaching Notebook
(describes home and center-based program for visually impaired young children)

____ Curriculum & Assessment Instruments
(lists 4 tools; with description, population best served; administration; advantages and disadvantages)

____ Home
(why home-like environments)

____ Developing an Individualized Service Plan

____ Toys & Materials

____ Center Base Program Overview

____ Parent Evaluation Form Procedure
(questionnaire re: program effectiveness)

____ Parent Activities
(listing of activities that took place in parent group)

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I. I. V. I.

International Institute for Visually Impaired, 0-7, Inc.
(BIRTH TO SEVEN)

PROJECT OUTREACH, USA

MATERIALS

Agency/Individual Name:

Address:

Telephone Number:

	Date Sent	No. Sent	Field Test	Response Returned
Adaptive Environment's Presentation				
A Model for Liaison With a Developmental Evaluation Team				
Brochure				
Center Base Program Overview				
Curriculum And Assessment Instruments				
Developing An Individualized Service Plan				
Home Teaching Notebook				
Parent Activities				
Parent Evaluation Form & Procedure				
Toys & Materials				

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FIELD TEST MATERIAL QUESTIONNAIRE - PARENTS

International Institute for Visually Impaired, 0-7, Inc.
(BIRTH TO SEVEN)

Date:

Name:

Address:

Telephone:

How old is your child who is blind or visually impaired? ______________

How many other children do you have?__________

Is your child who is blind or visually impaired the oldest ______ child?
youngest ______
middle ______

Do you feel that your child who is blind or visually impaired has other problems? Yes ____ No ____

Explain:

Were the materials helpful? Yes ____ No ____ (Please answer thoughtfully - we are trying to compile useful materials.)

Your suggestions for changes:

If you would like to share with us any materials you have found helpful, please send us copies or name and address of how to obtain them.

Thank you.

PROJECT OUTREACH, U.S.A.

14 Gay Street, Newtonville, Massachusetts 02160-2213 617/527-0476

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FIELD TEST MATERIAL QUESTIONNAIRE - PROFESSIONALS

International Institute for Visually Impaired, 0-7, Inc.

Date:

Name:

Address:

Telephone:

Number of Staff: ________

Number of Children: ________

Number of Visually Impaired Children: ________

Number of Multi-Impaired Children: ________

Were the materials helpful? Yes ____ No ____
(Please answer thoughtfully - we are trying to compile useful materials.)
Your suggestions for changes:

Please send us copies of the materials you are presently using on this subject or information on where they can be obtained.

Thank you.

PROJECT OUTREACH U.S.A.

14 Gay Street, Newtonville, Massachusetts 02160 617/527-0476
Mich. MICS #9400/Mass. A.G. Act. #14502/Fed. I.D. #38-2228033

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I.I.V.I.

International Institute for Visually Impaired, 0-7, Inc.

PROJECT OUTREACH, USA
MODEL SITE OBSERVERS' QUESTIONNAIRE

NAME (optional): ______________________________ DATE: ____________
TELEPHONE: ____________________________________

1. Why do you feel it is beneficial for you to visit the program? (i.e., because you are a Parent, Teacher, Student etc.)

2. Who are you observing and why? ___Children ___Teachers ___ Social Worker ___ Specialists

3. What aspects of the program are of particular interest to you?

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Jackie DeNike
Secretary/Treasurer

TELEPHONE LOG

Date	Staff Name	In	Out	Name	Address	Telephone	Purpose/Action

APPENDIX B

TIMELINE FOR OUTREACH GRANT

GOAL I: TO ASSIST AND ENCOURAGE THE DEVELOPMENT OF QUALITY PROGRAMS FOR CHILDREN WHO ARE BLIND OR HAVE VISUAL IMPAIRMENTS (0-3)

Project Activity	Year I			
	1	2	3	4
1. Identify sites/agencies desiring assistance	*--------	---------	---------	---------X
2. Provide consultation		*--------	---------	---------X
3. Provide Inservice Programs		*--------	---------	---------X
4. Provide demonstration through model site use		*--------	---------	---------X
5. Develop appropiate awareness materials	*--------	---------	--X	
6. Identify existing appropriate materials	*--------	---------	---------	---------X
7. Refinement and field testing of Demonstration Project materials		*--------	---------	---------X

Key: * Initiated
X Completed
---- Ongoing

TIMELINE FOR OUTREACH GRANT

GOAL II: TO ASSIST AND ENCOURAGE IMPROVEMENT OF EXISTING PROGRAMS

Project Activity	Year I			
1. Identify sites desiring assistance	*-	--------	--------	------X
2. Provide Consultation	*-	--------	--------	------X
3. Provide Inservice			*-------	------X
4. Onsite observation/ demonstration at model demonstration site		*-----	--------	------X
5. Develop appropriate awareness materials	*-	--------	-----X	
6. Identify existing appropriate materials	*-	--------	--------	------X
7. Dissemination of Demonstration Project materials		*-------	--------	------X
8. Participation in professional early childhood groups	*-	--------	--------	------X

Key: * Initiated
X Completed
----- Ongoing

TIMELINE FOR OUTREACH GRANT

GOAL III: TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF BLINDNESS AND VISUAL IMPAIRMENT ON GROWTH, DEVELOPMENT AND LEARNING

Project Activity	Year I			
1. Direct work with parent groups	*------	------	------	------X
2. Identify existing materials appropriate for use with parents of visually impaired infants (0-3)	*------	------	------	------X
3. Refine existing materials for use with parents	*	------	------	------X
4. Develop materials for use with parents and professionals	*------	------	------	------X
5. Use of mass media for awareness purpose	*	------	------	------X
6. Establish linkage with early identifiers for awareness activities for parents	*------	------	------	------X
7. Provide early identifiers with information for parents for referral purposes		*------	------	------X
8. Demonstration site use by parent and early identifiers for information and resources		*------	------	------X

Key: * Initiated
X Completed
---- Ongoing

TIMELINE FOR OUTREACH GRANT

GOAL IV: TO ESTABLISH LINKAGE AND PROVIDE ASSISTANCE FOR TRAINING PROGRAMS TO INCREASE AWARENESS OF THE UNIQUE NEEDS OF THE BLIND AND VISUALLY IMPAIRED INFANT AND YOUNG CHILD (0-3)

Project Activity	Year I			
1. Reconfirm and add to advisory council	*--------	--X		
2. Identify training programs	*------	-------	-------	------X
3. Provide consultation of training programs	*	-------	-------	------X
4. Provide inservice to training programs			*------	------X
5. Provide materials for training programs		*-----	-------	------X
6. Work cooperatively with training programs		*------	-------	------X
7. Provide for student intern/ student teaching placement			*----	------X

Key; * Initiated
X Completed
---- Ongoing

APPENDIX C

The Project Evaluator completed an Evaluation Summary for Spetember, 1983 - January 1984 which is included in the following section.

At the conclusion of the Project year, staff members were committed to other agencies and were unable to meet with the Project evaluator. Furthermore, the education coordinator had experience in developing and writing the evaluation reports on the previous HCEEP grant. It was decided that she would compile the evaluation report for the Project. Additional support from the evaluation specialist was not seen as a priority since the Project was not funded for next year.

PROJECT OUTREACH,U.S.A. EVALUATION SUMMARY
SEPTEMBER, 1983 - JANUARY, 1984

Project Outreach, U.S.A. has been in operation for only five months and in this short period the staff have made excellent progress toward meeting each of the major goals. This evaluation summary documents the accomplishments of the project to date.

At the organizational level, personnel have been hired for each of the project staff positions, the model demonstration site at Perkins School for the Blind is in operation and the project staff made a smooth transition from offices at Perkins School to a new location off the school grounds. Staff have also worked with the outside evaluator to set up record keeping procedures. These tracking procedures are now in place and operating without difficulty. The data for this report has been derived from the various project logs and conversations with project staff.

Progress Toward Goal I: Assist and Encourage Similar Programs

Efforts to stimulate new programs for young visually impaired children have focused primarily in the state of Maine with some additional efforts in Massachusetts and a workshop in Alabama. A presentation was also made at the HCEEP Director's meeting in December, 1983.

To date Project Outreach staff have provided inservice training, consultations, the opportunity tc visit the model site, and various printed materials to stimulate new sites. To date 681 children have been indirectly served as a result of the project's effort to encourage the development of additional services. See Table 1 for a summary of activities related to Goal I.

Progress Toward Goal II: Assist and Encourage Improvement of Existing Programs

Efforts to improve existing programs for young visually impaired children have focused primarily on the state of Massachusetts. Consultations, inservice training and visits to the model demonstration site have been used to meet the needs of existing sites. To date four different programs have been served with potential impact on 68 children. Various materials have also been provided to these programs from the project's extensive curriculum resources. A workshop for professionals was held in Maine during September, 1983. Twenty four people participated in the workshop. Evaluation questionnaire responses were obtained from 14 of the 24 participants. All of the respondents felt that the workshop met their needs. Participants were satisfied with the length of the workshop and they felt that the video presentations were very good. See Table 1 for a summary of activities related to Goal II.

Progress Toward Goal III: Broaden Awareness in Parents and Professionals

To date, at least in terms of number of contacts, the major project efforts have been related to Goal III, to increase awareness of parents and professionals of the impact of blindness and visual impairment on the development of young children. Project staff have met with various parent groups in Maine, Connecticut and Massachusetts. Plans are well underway for a regional parent meeting to be held in April, 1984. Awareness materials have also been distributed for parents. Meetings with professionals and elected officials have been held. Awareness materials have been sent to 20 agencies and more than 600 copies of awareness materials have been distributed. In addition, more than 400 agency resource questionnaires have been sent.

The mass media has also been utilized to broaden awareness of the project goals. Articles have appeared in eight newspapers in New England although most of the print coverage has centered on the Greater Boston area. A local cable television station has produced and aired a ½ hour program about the project. See Table 1 for a summary of activities related to Goal III.

Progress Toward Goal IV: Establish Linkage and Provide Assistance for Training Programs

To date the major efforts to promote linkages with professionals has been through participation of various professionals on the advisory council. Of the 20 members of the advisory council, 14 members are either directly or indirectly involved in programs which provide training for people who come in contact with young visually impaired children. The remaining members of the advisory council are parents of the visually impaired and other concerned individuals. There have been two meetings of the advisory council and awareness materials have beendistributed to each member. See Table 1 for a summary of activities related to Goal IV.

Model Demonstration Site Activities

To date twenty six persons have visited the demonstration site at Perkins School for observation. Visitors have included teachers, teacher trainees, parents, ancellary personnel, and a teacher trainer. A total of 80 handouts were distributed tovisitors. Of particular interest tothe visitors are the parent group, the curriculum, and the assessment procedures.

Conclusion

As can be seen from this evaluation report, the staff are highly organized and actively engaged in accomplishing each of the project goals. It is the opinion of the outside evaluator that Project Outreach U.S.A. should have no difficulty meeting their goals for 1983-1984. Continued funding for this project should lead to even greater impact on services for young visually impaired children.

Table 1

Project Outreach U.S.A. Activities 9-83 Through 1-84

Activity	I	II	III	IV	TOTAL
Resource Questionnaire Sent	-	-	2	-	2 (400 + pieces)
Information Sent	-	-	3	-	3
Consultation	1	3	2	-	6
Inservice	2	1	1	-	4
Model Site Visit	3	1	1	-	5
Awareness Materials Sent	3	2	20	18	43 (600+ pieces)
Existing Materials (Sent/Received)	2	3	2	-	7
Field Testing of Materials	2	0	0	-	2
Number of People Served	55	19	52	18	144
Number of Children Served	681	68	31	-	780

ANNUAL EVALUATION REPORT

JUNE 30, 1984

FOR

PROJECT OUTREACH, U.S.A.
INFANT-TODDLER, BIRTH - 3
(blind or visually impaired)

ANT NUMBER: G008302068

DA: 84.024B

SHERRY RAYNOR, PROJECT DIRECTOR

INTERNATIONAL INSTITUTE FOR
VISUALLY IMPAIRED, 0-7, INC.
1387 WASHINGTON STREET
WEST NEWTON, MASSACHUSETTS 02165
TELEPHONE: (617) 332-4014

PROJECT EVALUATION PLAN

GOAL I: TO ASSIST AND ENCOURAGE THE DEVELOPMENT OF SIMILAR PROGRAMS FOR CHILDREN WHO ARE BLIND OR HAVE VISUAL IMPAIRMENTS (0-3)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
1.	Identify sites/ agencies desiring assistance	Sites/Agencies desiring assistance were identified	a. Inspect the logs for the number of agencies which request assistance	a. 31 agencies requested assistance
			b. Inspect the logs for the decisions made regarding the type(s) of assistance to be provided	b. The Project records document types of assistance provided
2.	Provide Consultation	Identified sites/ agencies received consultation which resulted in a formalized plan for service requested	a. Inspect the logs for the number and types of contact between Project staff and the site/ agency	a. The Project records list phone, letter and direct contacts with agencies
			b. Inspect the logs for the responses to the Needs Assessment	b. The Project records document Needs Assessments completed as well as summaries of identified needs
			c. Inspect the plan of service established for each agency	c. Service plans are recorded for all agencies

GOAL I: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
3.	Provide Inservice Programs	Inservice training was provided to selected sites/agencies to meet their needs	a. Inspect logs for types of training provided	a. The Project records list types of inservice training provided to each agency
			b. Inspect the logs for number of agency personnel who participate	b. 108 agency personnel received training
			c. Inspect the logs for number of non-agency personnel who participate	c. 15 non-agency personnel received training
			d. Inspect the logs for number and dates of inservice training sessions	d. The Project records list dates and number of inservice training sessions provided
			e. Analyze data from an "Inservice Evaluation Questionnaire" which will be designed to assess areas of strength and weakness in the methods used to provide training	e. The Project records contain summaries as well as all questionnaires completed by workshop participants

GOAL I: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
4.	Provide demonstration through model site use	The model site was used for observation, intern placement and training, and/or staff consultation	Inspect the logs for:	
			a. The number of people who observe the model site	a. 25 people observed the model site
			b. The number of student interns who are placed at the model site	b. 3 interns were placed at the model site and Project site
			c. The number of materials which are distributed to visitors	c. 250 Project materials were distributed
			d. Data to analyze from a "Model Site Visitors Questionnaire" to assess usefulness of model site visitation. (To be administered to at least 25% of the model site visitors)	d. The Project records contain Model Site Visitors Questionnaires completed by 25% of the visitors
5.	Develop appropriate awareness materials	Awareness materials were developed and distributed	a. Review printed materials to be used for awareness	a. Printed materials for awareness are in Project files

GOAL I: (Continued)

ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
6. Identifying existing appropriate materials	Evidence that various potential sources of materials have been contacted	a. Inspect logs for list of agencies, individuals, libraries, and resource centers contacted	a. Project files list sources for materials
		b. Review materials located from various sources	b. The Project has a list of materials available for distribution
7. Refinement and field testing of Demonstration Project Materials	Demonstration Project Materials were reviewed, refined and field tested	a. Review revised materials	a. All Project materials were reviewed, revised and assembled for field testing
		b. Inspect logs for evidence of field testing of materials	b. The Project logs list agencies receiving field testing materials; Project files contain folder of field test materials sent out
		c. Analyze a "Materials Evaluation Questionnaire" given to sites/individuals who use the materials	c. Material Evaluation Questionnaires were distributed and results are filed with Project records

GOAL II: TO ASSIST AND ENCOURAGE IMPROVEMENT OF EXISTING PROGRAMS

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
1.	Identify sites desiring assistance	Sites desiring assistance were identified and served	a. Inspect the logs for the number of sites which request assistance	a. 31 agencies requested assistance
			b. Inspect logs for the decisions made regarding the type(s) of assistance to be provided	b. The Project records document types of assistance provided
2.	Provide Consultation	Sites requesting assistance received appropriate services	a. Inspect logs for number of request	a. 31 request for consultation received
			b. Inspect logs for number and types of contact by Project staff	b. Project logs document types of contacts made
			c. Inspect logs for type of service provided	c. Project records document all sites and types of services provided to each
3.	Provide Inservice Programs	Inservice training was provided to selected sites to meet their needs	a. Inspect logs for types of training provided	a. Project records contain agendae for all inservice programs

GOAL II: (Continued)

ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
3. (Continued)		b. Inspect the logs for number of agency personnel who participate	b. 114 agency personnel received inservice training
		c. Inspect the logs for number of non-agency personnel who participate	c. 21 non-agency personnel received training
		d. Inspect the logs for number and dates of inservice training sessions	d. Project records document dates, and sites of all inservices performed
		e. Analyze data from an "Inservice Evaluation Questionnaires" which will be designed to assess areas of strength and weakness in the methods used to provide training	e. Project records contain summaries of all completed "Inservice Evaluation Questionnaires"
4. Onsite observation/ demonstration at Model Demonstration site	The model site was used by agencies for observation, intern placement, and training, and staff consultation	Inspect the logs for:	
		a. The number of people who observe the model site	a. 25 people observed the model site
		b. The number of student interns who are placed at the model site	b. 3 interns were placed at the model site and Project office

GOAL II: (Continued)

ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
4. (Continued		c. The number of materials which are distributed to visitors	c. 250 materials were distributed to visitors at the Model Site
		d. Data to analyze from a "Model Site Visitors' Questionnaire" to assess usefulness of model site visitations. (To be administered to at least 25% of the model site visitors	d. Project records document Model Site Visitors' Questionnaires completed by observers
5. Develop appropriate awareness materials	Awareness materials were developed and were distributed	a. Review printed materials to be used for awareness	a. Printed awareness materials are in Project files
6. Identify existing appropriate materials	Evidence taht various potential sources of materials have been contacted	a. Inspect logs for list of agencies, individuals, libraries, and resource centers contacted	a. Project files list sources for materials

GOAL II: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
6.	(Continued)		b. Review materials located from various sources	b. Project records list materials available for distribution
7.	Dissemination of Demonstration Project materials	Project materials were disseminated to agencies requesting materials	a. Inspect logs for evidence of materials disseminated	a. Project records document all materials diseminated
			b. Analysis of "Materials Evaluation Questionnaires" (To be sent to 25% of agencies who receive materials.)	b. Project records contain completed Material Evaluation Questionnaires
8.	Participate in professional early childhood groups	Project staff provided information to early childhood groups	a. Inspect logs for evidence of participation in professional early childhood groups	a. Project activity calendars document early childhood meetings, workshops, etc., attended by Project staff
			b. Inspect logs for evidence of materials disseminated to early childhood groups	b. Project records show that more than 20,000 items were distributed

GOAL III: TO BROADEN AWARENESS IN PARENTS AND PROFESSIONALS OF BLINDNESS AND VISUAL IMPAIRMENTS ON GROWTH, DEVELOPMENT AND LEARNING

	ACTIVITIES	CRITERIA	EVALUATION PROCEDURES	RESULTS
1.	Direct work with Parent Groups	Outreach activities included activities specifically targeted to identified parent groups	a. Inspect logs for evidence of requests from parent groups	a. 9 parent groups requested assistance
			b. Inspect logs for evidence of the activities carried out with parent groups	b. Project logs document activities conducted with parent groups
			c. Inspect logs for evidence of the amount of contact with parent groups	c. Project logs document contact between Project staff and parent groups
			d. Analyze "Parent Group Evaluation Questionnaire" which will be administered to members of parent groups at the end of the year to assess the effectiveness of the Project's Outreach activities	d. Project records contain workshop evaluations completed by parents who attended Project Workshops
2.	Identify existing materials appropriate for use with parents of visually impaired infants (0-3)	Evidence that various potential sources of materials were contacted	a. Inspect logs for list of agencies, individuals, libraries, and resource centers contacted	a. Printed awareness materials are in Project files

GOAL III: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
2.	(Continued)		b. Review materials located from various sources	b. Project records document materials available for Outreach
3.	Refine existing materials for use with parents	Demonstration Project Materials have been reviewed and were necessary refined and then field tested	a. Review revised materials	a. Project materials were reviewed and revised for use with parents
			b. Inspect logs for evidence of field testing of materials	b. Project records list all materials field tested by agencies or individuals and their location
			c. Analyze a "Materials Evaluation Questionnaire" given to sites who use the materials (To be given to at least 25% of the sites who receive materials)	c. Project records document all "Material Evaluation Questionnaires" sent out with field test materials
4.	Develop materials for use with parents and professionals	Materials were developed and distributed	a. Review printed materials to be used	a. Project records list materials used for distribution
5.	Use of mass media for awareness purposes	Contacts were made for distribution of information	a. Inspect logs for evidence of contact and results	a. Project logs document dates and types of mass media used for awareness

GOAL III: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
6.	Establish linkage with early identifiers for awareness activities for parents	Project staff were on Advisory Councils, or helped coordinate activities, conferences, and cooperative service arrangement with other agencies	a. Inspect logs for evidence of participation/collaboration with other agencies	a. Project records document all agencies with whom staff have established linkages
7.	Provide early identifiers with information for parents for referral purposes	Early identifiers received Project materials and resources which aid the referral process	a. Inspect logs for requests and evidence of materials disseminated to early identifiers	a. Project records document agencies requesting information and materials disseminated
			b. Analyze responses to the "Early Identifier's Evaluation Questionnaire" regarding the impact of the materials provided by the Project	b. Project records contain workshop evaluations completed by early identifiers who received materials at workshops
8.	Demonstration site used by parents and early identifiers for information and resources	The model site was used by parents and early identifiers for observation and consultation	a. Inspect logs for number who observed model site	a. Records at Model Site document visitors and titles.
			b. Inspect logs for number who consult with model site personnel	b. 12 early childhood programs consulted with personnel at the Model Site and the Project

GOAL III: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
8.	(Continued)		c. Analyze data from "Model Site Visitors' Questionnaire" to assess usefulness of site visitations	c. Project records contain Model Site Visitors' Questionnaire Summary

GOAL IV: TO ESTABLISH LINKAGE AND PROVIDE ASSISTANCE FOR TRAINING PROGRAMS TO INCREASE AWARENESS OF THE UNIQUE NEEDS OF THE BLIND AND VISUALLY IMPAIRED INFANT AND YOUNG CHILD (0-3)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULT
1.	Reconfirm/add to advisory council	Members included parents and representatives of agencies and services for blind children	a. Inspect logs for membership	a. 31 individuals were advisory council members: 8 parents; 9 staff members; 14 agency representatives
2.	Identify training programs	Training programs desiring assistance were identified	a. Inspect logs for evidence of contacts with training programs	a. Project logs document training programs contacted
3.	Provide consultation to training programs	Programs requesting assistance received appropriate services	a. Inspect logs for number of request	a. 7 programs received assistance
			b. Inspect logs for number and types of contact by Project staff	b. Project logs list types and numbers of contacts
			c. Inspect logs for types of training provided	c. Project logs document types of training provided
4.	Provide inservice to training programs	Inservice training was provided to selected sites/agencies to meet their needs	a. Inspect logs for types of training provided	a. Project records document all inservices conducted with training programs

GOAL IV: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
4.	(Continued)		b. Inspect logs for number of agency personnel who participate	b. 26 personnel received training
			c. Inspect the logs for number of non-agency personnel who participate	c. No non-agency personnel attended
			d. Inspect logs for number and dates of inservice training sessions	d. Project logs document dates and types of inservice training
5.	Provide materials for training programs	Project materials were disseminated to programs requesting materials	a. Inspect logs for evidence of materials disseminated	a. Project records document materials distributed
			b. Analysis of "Materials Evaluation Questionnaire" (To be given to 25% of the programs who receive materials)	b. Project records document responses to Material Evaluation Questionnaires
5.	Work cooperatively with training programs	Project staff worked with other training programs to promote awareness and to provide training relative to the needs of young blind children and their families	a. Inspect logs for evidence of contacts	a. Project phone logs and record logs document contacts with training programs

GOAL IV: (Continued)

	ACTIVITY	CRITERIA	EVALUATION PROCEDURES	RESULTS
6.	(Continued		b. Inspect logs for evidence of cooperative activities	b. Project records document cooperati activities
7.	Provide for student intern/student teaching placement	The model site was used by student interns/student teachers to further their training	a. Inspect logs for evidence of student placement of student interns/student teachers	a. 3 internships were placed: 2 at model site; 1 at Project site
			b. Analyze responses to "Student Intern/ Student Teacher Evaluation Questionnaire" to determine the impact of the training experiences at the model site	b. Project records do not document Student Teacher Evaluation Question naires

APPENDIX D

WORKSHOP SITE: Alabama

DATE: February 10-12, 1984

PARENTS AS PARTNERS

Diana did a very good job

I believe that it is helpful to have a professional parent of a visually impaired child relate their experience with other professionals.

DEVELOPING A PROGRAM...

I believe the idea of stressing developmental skills is important especially the idea that all kids, i.e. even with visual impairments, go through developmental norms.

ASSESSMENT & CURRICULUM

...very good session.

DEVELOPING AN INDIVIDUAL SERVICE PLAN

Overall rating of this session was good to excellent.

PARENTS THE BEST TEACHERS

Overall rating of this session was good to excellent.

GENERAL COMMENTS

Overall quality excellent - very practical, functional, grass roots approach.

Good recommendations which generalize across all handicaps.

WORKSHOP SITE: Maine

DATE: February 23-24, 1984

PARENTS AS PARTNERS

WOW! She's been there...and reached back and done something about it.

Good overall coverage.

HOME TEACHING

Good emphasis on parent involvement and positive approach.

I liked the relationship with the family - making them feel good and being important.

Maine (continued)

ASSESSMENT TOOLS

Very good description.

...I especially liked being introduced to the assessment tools.

PARENTS THE BEST TEACHERS

Interesting - comment regarding - professionals seeing parents as weak when they see themselves as strong. We are guilty of this and I thank you for bring it out. We'll all be more aware and will improve I'm sure! Thanks!

DEVELOPING AN I. S. P

Helpful, good I.S.P. form, long range goals tend to be overlooked.

Pointed out the need for uniform I.S.P. throughout this state.

PARENT ACTIVITIES

Good sharing of information and resources through worksheet about program.

Important area for us to devote time to.

WORKSHOP SITE Maine

DATE: June 8, 1984

DEVELOPMENT OF BLIND CHILDREN

We probably could have gone all day on this subject alone.

Good material and presentations which could have lasted for several days to cover more depth.

HOME TEACHING/ASSESSMENT MEDIA

Very good film. Great feedback. I learned a lot from this tape presentation.

MORE ALIKE THAN DIFFERENT

Good video tape - extremely general.

Discussion good and helpful.

TOYS - LEARNING TOOLS

Very helpful with good specific examples.

More! More!

WORKSHOP SITE: South Carolina

DATE: May 4 - 6, 1984

PARENTS MAKE THE DIFFERENCE

It helped me understand my child's needs. For the first time at a workshop I learned a lot from everyone.

I especially liked the handouts that I could carry home, devour and digest at my leisure.

Thank you for everything because I didn't know if there was something I wasn't doing that I should. You've answered so many questions and given me the peace of mind to know I was doing OK.

WORKSHOP SITE: Boston

DATES: February 13, 1984; May 7, 1984; June 4, 1984;

ADAPTIVE ENVIRONMENTS

I feel I can use this information every year that I teach either on the itinerant program or in the classroom.

Well put together, well organized. Can be adapted to older children.

Gave good information on community resources. Useful because it tied adaptations to needs.

ASSESSMENT AND CURRICULUM

It was good to review curriculum and assessment instruments.

Parents view of CORE, I.E.P., etc. was very helpful. It's easy to loose sensitivity to the parents.

I have been seeking more assessments and will be able to use what I learned.

TOYS

Good suggestions and ideas for making home-made toys...

Lots of ideas and the handout will keep me busy for awhile.

WORKSHOP SITE: New York

DATE: May 16 - 17, 1984

PARENTS THE BEST TEACHERS

Helpful for tactile stimulation and auditory stimulation activities.

The video shows that parents are the best source of and know their children best.

...will attempt to enlarge (local) parent group for positive political actions which would improve services, funding, etc. (parent comment)

VISUAL IMPAIRMENTS & THEIR EDUCATIONAL CONSEQUENCES

Good session because it wasn't too wordy for nonprofessionals.

DEVELOPMENT OF BLIND CHILDREN

Yes, I work with a child at the CP Center who is blind (the material covered met my needs)

Video at beginning of session was outstanding.

All teachers and parents should see the video.

LANGUAGE DEVELOPMENT

Film was good.

(Topic covered in sufficient depth and detail?) For my purposes as a Children's Consultant.

Good discussion on parents and handicapped children.

ASSESSMENTS - GOALS - WEEKLY ACTIVITIES

Very good and useful session to me.

Excellent idea to role play assessment with parent.

ACTIVITIES FOR BLIND CHILDREN

Overall rating for this session was good to excellent.

MODIFYING & ADAPTING THE ENVIRONMENT

Gave new ideas for the home, made me think.

This was a very interesting topic and informative.

WORKSHOP SITE: Dorchester Early Intervention Program

DATE: December 13, 1984

DEVELOPMENT OF BLIND CHILDREN

Very helpful. Will need further information on specific topics in the future.

WORKSHOP SITE: Kennedy-Donovan Centers

DATE: June 20, 1984

DEVELOPMENT OF BLIND CHILDREN

Great film.

It is very parent oriented and will be excellent for us to share with our parents.

Good resource to have for parent contact - this has given us a base - it appears that there is much to learn which we could adapt to our children... We look forward to have you come back again for further training.

APPENDIX E

The Children's Hospital • Boston

300 Longwood Avenue, Boston, Massachusetts 02115 • (617) 735-6501

Developmental Evaluation Clinic

December 14, 1983

Ms. Sherry Raynor
Project Outreach U.S.A.
International Institute for Visually
Impaired, Birth to 7
14 Gay Street
Newtonville, MA 02160

Dear Ms. Raynor:

We would like to request a presentation on Services for Children with Visual Impairments for our course on Services for Children with Handicaps for students of the Harvard School of Public Health. The class consists of physicians, nurses, administrators, nutritionists, and others interested in delivery of health services. It will be held on Mondays and Wednesdays from 10:30 to 12:15 in Room 1116 in the Fegan Building at Children's.

The format for the class is one hour of lecture and approximately one half hour for questions and discussion. Topics such as service needs and service delivery, education, and issues of integration and normalization for this group of children and their families would be of interest to this group.

The breadth of your knowledge of this field as well as your diversity of experience have been made known to us by several people. We hope you can do the presentation and would like to hear from you in the next two weeks if possible.

Sincerely yours,

Allen C. Crocker, M.D.
Director, Developmental
Evaluation Clinic

ACC/jt

EASTERN
MONTANA COLLEGE

1500 North 30th Street, Billings, MT 59101-0298 Montana Center for Handicapped Children 406/657-2312

February 24, 1984

Sherry, Raynor
International Institute for
the Visually Impaired, 0-7
14 Gay Street
Newtonville, MA 02160

RE: Project Outreach - USA

Dear Ms. Raynor:

As part of our SIG activities, we would like to obtain copies of outreach project materials. This information could include project abstracts, products, component development or any material you have available. It would be beneficial to our efforts to know the various methods utilized by others in terms of systematic approaches to effective early intervention. By having the opportunity to obtain and review outreach materials we can focus on delivery systems which include best practices, cost effectiveness analysis, common problems and issues in a service environment and dissemination practices.

The purpose of this letter is to request material regarding your Outreach project. If you could share the information with us it would be greatly appreciated as we attempt to create pilot sites, strengthen existing service programs, provide stimulation to local educational agencies and build an early childhood intervention data system, program guidelines and standards for future use.

Thanking you in advance of sharing materials from your project.

Sincerely,

R. E. Bauer

Roger E. Bauer, Coordinator

REB/sls

ARKANSAS SCHOOL FOR THE BLIND
[ESTABLISHED 1859]

2600 WEST MARKHAM — P.O. BOX 668
LITTLE ROCK, ARKANSAS 72203
501 - ~~663-4185~~ 371-2109

January 10, 1984

Ms. Sherry Raynor, Director
Project Outreach, USA
International Institute for Visually Impaired, 0-7, Inc.
14 Gay Street, Newtonville, Massachusetts 02160-2213

Dear Ms. Raynor:

Dr. Polly Cooper, our Coordinator of Special Education, sent me your letter outlining services. I have sent a copy to our Superintendent, Dr. Hugh Pace, requesting that this agency join the Institute.

I am very excited by the possibility of receiving in-service training for our preschool staff. Staff of this program includes three preschool specialists and one occupational therapist. The preschool specialists travel the state providing early intervention services in the home and in day centers enrolling visually impaired preschoolers. The Occupational Therapist serves visually impaired preschoolers with other handicapping conditions. As three of these folks are new this year we are in dire need of the services it appears that you provide.

This program also employs an orientation and mobility specialist who works with all ages (preschool and school age) around the state who could also benefit from instruction.

We will look forward to hearing from you and will be happy to supply additional information on our program services to the 100 families of visually impaired preschool children currently identified around our state.

We have been hoping to find in-service opportunities in just the areas mentioned in your letter.

Sincerely,

Bob Brasher

Bob Brasher,
State Coordinator
Educational Services for the Visually Impaired

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BB/tm

ACCREDITED BY NATIONAL ACCREDITATION COUNCIL FOR AGENCIES SERVING THE BLIND AND VISUALLY IMPAIRED
AND NORTH CENTRAL ASSOCIATION OF COLLEGES AND SCHOOLS

AN EQUAL EMPLOYMENT/EDUCATIONAL OPPORTUNITY AGENCY

atlanta area services for the blind (404) 875-9011
763 peachtree street, n.e., atlanta, georgia 30308

October 10, 1983

Ms. Sherry Raynor, Coordinator
Infant/Toddler Program
Perkins School for the Blind
175 North Beacon Street
Watertown , Mass. 02172-9982

Dear Ms. Raynor:

For several years I have used some of the materials that your program at Ingham Intermediate School District developed for use by parents and professional counselors who were involved with pre-school blind children.

I am very interested in helping to develop a program that will be of value to pre-schoolers and their parents in the Atlanta area. There is an array of services offered in this large metro area but there is no central referral point and no consistency in availability of services. Many parents who call us for information have found us under Blindness Information in the telephone book. At present we have no formal program either,and the most that I can offer is an interview or two, perhaps a home visit, and a bibliography of appropriate materials along with a few xerox copies of helpful articles that I have found in professional journals. For many years, I worked in a very small agency doing parent counseling and some direct services with their pre-school visually impaired children and I am dismayed that parents still have no referrals from their pediatricians or ophthalmologists to sources of help, but are left to their own resources at a time when they need encouragement and guidance.

The Board of Directors of AASB has included services to infants and pre-schoolers in their long range plan of 1983, and the first year includes researching existing programs in our area and elsewhere. Do you have any materials that you could share with me as we work toward this goal? Your philosophy, objectives and format at Perkins concur with my own perception of the abilities and capabilities of visually impaired children and of the role of parents in their optimum development. I would hope that a representative of this agency might eventually visit your program to see the 0-3 and the 3-5 activities in action.

I appreciate very much any information, advice, that you could share.

Sincerely,

June J Willis

June J. Willis
Director of Social Services

accredited member, national accreditation council a united way agency

Kansas State Department of Education

Kansas State Education Building

120 East 10th Street Topeka, Kansas 66612

January 6, 1984

Sherry Raynor
14 Gay Street
Newtonville, Massachusetts 02160

Dear Sherry:

As you know, Kansas does not mandate services to preschool handicapped children, but we do have a growing network of preschools across the state. We include all categories of handicap in most of the preschools under a teacher trained in early childhood handicapped education.

Because the teacher education is across all areas of handicap, there is, of course, less depth in each area than a categorical teacher would have. Our teachers need additional assistance in specific areas.

One area of need is for assistance in serving severely visually impaired young children. The parents were very pleased with your special workshop last July in Kansas City, Kansas. Our teachers would benefit greatly from an opportunity to learn from you. We hope it will be possible to arrange for you to come to Kansas and work with the early childhood teachers next year.

We will be looking forward to hearing from you whether this can be scheduled.

Sincerely,

Lucile Paden

Lucile Paden
Education Program Specialist

LP:bl

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An Equal Employment/Educational Opportunity Agency

VERNE A. DUNCAN
State Superintendent
of Public Instruction

DONALD H. EDWARDS
Director

OREGON DEPARTMENT OF EDUCATION
SCHOOL FOR THE BLIND
700 CHURCH STREET SE, SALEM, OREGON 97310 PHONE (503) 378-3820

January 24, 1984

Ms. Sherry Raynor, Director
International Institute for
  Visually Impaired, 0-7 Inc.
14 Gay Street
Newtonville, Massachusetts 02160-2213

Dear Ms. Raynor:

We are pleased with the development of Project Outreach and look forward to using it in our programs. There has been a lack of available assessments/curriculums as well as a lack of training of professionals in how to deal with the preschool visually impaired child. Many individuals do not understand the importance of concept development in visually impaired preschoolers or how to promote the acquisition of concepts. Assessment tools, techniques and curriculum materials are vitally needed to achieve appropriate instruction to visually impaired preschoolers.

We are anxiously hoping your group will be able to make a statewide presentation in Oregon. We have a definite need for such instruction.

Sincerely,

Mary Reid

Mary Reid, Mid-Oregon Regional
  Program for Visually Impaired

Evelyn Riggan

Evelyn Riggan, Oregon School
  for the Blind

Mark Moskowitz er

Mark Moskowitz, Southern Oregon
  Program for Visually Impaired

Phyllis Ricketts

Phyllis Ricketts, Eugene Regional
  Program for Visually Impaired

Terry Cadigan er

Terry Cadigan, Eastern Oregon Regional
  Program for Visually Impaired

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Helen Stricklin er

Helen Stricklin, Portland
Regional Program for Visually
Impaired

Dusty Johnson er

Dusty Johnson, Central Oregon
Regional Program for Visually
Impaired

Commonwealth of the Northern Mariana Islands
OFFICE OF THE SUPERINTENDENT
DEPARTMENT OF EDUCATION
SAIPAN, CM 96950
Phone: 9812/9623/9827/9311

Cable Address:
Gov. NMI Saipan

January 11, 1984

Sherry Raynor, Director
Project Outreach, USA
14 Gay Street
Newtonville, Massachusetts 02160

Dear Ms. Raynor:

We are indeed interested in receiving assistance in developing services for blind and visually impaired children birth to school age. At present our service and delivery systems are terribly inadequate. This is mainly due to a lack of qualified available personnel.

The topics you outlined go to the heart of our deficiencies. I am most anxious to take whatever steps are necessary to receive assistance through Project Outreach, USA.

I look forward to working with you for the improvement of services to our blind and visually impaired children.

Sincerely,

Daniel Nielsen

Daniel Nielsen
Special Education Coordinator

BEST COPY AVAILABLE

National Association for Parents of the Visually Impaired, Inc.

• support
• information
• service

P.O. Box 180806, Austin, Texas 78718, Tel. (512) 459-6651

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Salamanca, New York
Elaine Puryear, Vice President
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Linda Katakee, Secretary
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Mary Lou Wilkinson
Forrest City, Arkansas
Judi Stotland
Los Angeles, California

Executive Director
Lee W. Robinson
Austin, Texas

February 3, 1984

Ms. Sherry Raynor, Director
Project Outreach USA
International Institute for Visually Impaired, 0-7
14 Gay Street
Newtonville MA 02160-2213

Dear Ms. Raynor:

The National Association for Parents of the Visually Impaired Inc. (NAPVI) recognizes the vital importance of identifying and serving the needs of preschool visually impaired children in the United States and wishes to extend its support to the proposed expanded activities of Project Outreach USA.

As there is such a low-incidence, yet far-flung population of preschool blind children, it is vitally important that outreach of quality programs is available.

We see a tremendous need for coordinated effort in this educational process on the national, state and local level and wish to offer our help and support as you carry out the activities of your project.

The commitment and dedication of the IIVI staff has been tremendous and we commend you for the many fine materials and programs already developed. We wish you continued success in your effort to reach increased numbers of preschool blind and visually impaired children.

Sincerely,

Lee W Robinson

Lee W. Robinson, Executive Director

LWR/ks

BEST COPY AVAILABLE

Orange County Cerebral Palsy Association, Inc.
ANNE SNEED DEANE REHABILITATION CENTER
A U.C.P. AFFILIATE
R.D 2 FLETCHER STREET
GOSHEN, NEW YORK 10924
(914) 294-8806

February 7, 1984

Sherry Raynor, Director
Project Outreach, U.S.A.
International Institute for Visually
Impaired 0-7, Inc
145 Gay Street
Newtonville, MA 02160

Dear Sherry:

The Orange County Cerebral Palsy Association, Inc. is an agency that delivers services to clients of all ages and various handicapping conditions which include people with visual handicaps. However, it has become evident that there exists on both a County and Regional level a need for appropriate services for people who are visually impaired. To that end, it is my understanding that you are the only funded outreach program in the country!

We will be needing your services this year. We hope to have a 2-day inservice in May to cover Assessment and Curriculum and other topics not only for our staff but for other agencies/professionals in this area.

We also anticipate using your services next year for another inservice. I sincerely hope that you receive funding and that you continue to be available to us.

Sincerely yours,

Jeffrey Spiro
Program Director

JS/nb

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Bay-Arenac Intermediate School District

JACK C. McCONKEY, Superintendent
4228 TWO MILE ROAD, BAY CITY, MICHIGAN 48706-2397
PHONE (517) 686-4410

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January 12, 1984

Project Outreach USA
Massachusetts Office of International
  Institute V.I. 0-7
14 Gay Street
Newtonville, Massachusetts 02160

TO WHOM IT MAY CONCERN:

I am presently working with visually impaired students ranging in age from 0 to 25 years and am in need of information to assist in development of my program in special education of the visually impaired.

Please forward any available materials in the area of special education of the visually impaired including pamphlets, catalogues, newsletters, material lists, ideas, etc.

Thank you for your early attention to this matter and for any assistance you may be able to offer.

Sincerely,

Nancy Jo Myers

Nancy Jo Myers
Visian Consultant

NJM/bp

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Assistant Superintendent
In Charge of Special Education

SHIRLEY R. RAPPAPORT
Assistant Director,
Special Education

ROBERT E. HAYHURST
Director, Regional
Educational Media Center

WILBERT C. KLEINSMITH
Coordinator,
Career Education

PAUL V. PARRENT
Director,
Data Processing

DIANE M. FR
Assistant Dir
Data Processi

MICHAEL E. DOMSIC
Coordinator,
Planning

NELSON H. GOOD
Supervisor,
Center Programs

SHERRY L. KAHAAR
Supervisor, Trombley
Infant/Pre-school Program

**American
Printing House
For The Blind
Incorporated**
1839 Frankfort Avenue
Mailing Address:
P.O. Box 6085
Louisville, Ky. 40206-0085

502 895-2405
TWX 810 535-3449

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February 6, 1984

Ms. Sherry Raynor
Director
Project Outreach USA
International Institute for
Visually Impaired, 0-7 Inc.
14 Gay Street
Newtonville, Massachusetts 02160-2213

Dear Sherry:

I am pleased and excited to hear of your grant application for funding of a second year outreach project. It is my opinion, having observed programs for infant and preschool visually impaired children throughout the nation, that you and your colleagues have developed an excellent model in the Perkins Infant-Toddler Program. Now, the outreach phases are critical in disseminating the program model, services, materials, and media developed.

Over the twelve years I have worked in this field, yours has been a role of action and leadership in developing services for blind and visually impaired children throughout the United States. It is my hope that through the outreach phases, you will be able to participate in upgrading programs and services for visually impaired children nationwide. I have every confidence that you and your colleagues will be able to accomplish this in an exemplary fashion.

Sincerely,

Sheri Moore

Sheri Moore
Research Scientist
Department of Educational Research

SM/gb

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STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
AUGUSTA, MAINE 04333

MICHAEL R. PETIT
COMMISSIONER

ADDRESS REPLY TO:
Bureau of Rehabilitation
200 Main Street
Lewiston, Maine 04240
Tel: 207-783-9151
Toll Free: 1-800-482-7517

June 13, 1984

International Institute for Visually
Impaired, 0-7, Inc.
14 Gay Street
Newtonville, MA 02160-2213

Dear Julie:

As usual, Diana and youself were exhilerating!

I hope that your trip home was safe and enjoyable.

I am now writing to obtain from you the following articles:

1. Hand-finger plays.
2. The hand out w/the four Pocket Mobile ...you gave out earlier at a presentation.
3. I would like to order Judy's book - when available.
4. VanDike - Baby Dance
5. The address of Eye Care Puzzles - (cloth)
6. The address or copies of Barriza's tests.

Take your time with these, no hurry.

Have a great time in Arizona. Give Becky a hug and kiss for me. Give my regards to the ladies.

Sincerely,

Doreen S. McDonald

Doreen S. McDonald
Preschool Counselor

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THE SCHOOL COMMITTEE OF THE CITY OF BOSTON

PUBLIC SCHOOLS

12/13/83

Ms. Julie Urbán
International Institute for the Visually Impaired
14 Gay Street
Newtonville, MA. 02160

Dear Ms. Urban,

Thank you very much for taking the time to meet with us today. The In-Service Programs that we duscussed will be of great benefit to our staff. I particularly look forward to seeing the Adapted Environments Program and also the creative toys for young visually handicapped children. Finding sources for appropriate and meaningful In-Service programs for a low incidence population is often very difficult. If it is possible, I would like to consider continuing the In-Service program into the school year 1984-1985. Perhaps we can discuss this at a later date. Again let me thank you very much for offering these services to the Boston Public Schools. I believe these programs will be of great value and will assist us in delivering services to young visually handicapped children.

Very truly yours,
-Mary Jane Drinkwater
Mary Jane Drinkwater, SPED Designee
MJD/sac

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The Kennedy Center for Handicapped Children, Inc.

The Kennedy-Donovan Center

For Programs in Early Development

75 Central Street, Ashland, MA 01721 ● Tel. 881-5211

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Walpole

Sue A. Warren, Ph.D
Boston University
Professor of Special Education

Jane Sheridan
Canton
Parent

June 29, 1984

International Institute for
Visually Impaired
14 Gay St.
Newtonville, Mass. 02160

Attention: Julie Urban and Diane Cuthbertson

Dear Diane and Julie:

On behalf of the Ashland and Hopedale Kennedy-Donovan Center I would like to thank you for your well organized and interesting in-service. The information presented certainly stimulated us to look forward to another in-service opportunity to further expand our knowledge of working with the visually impaired child. As evident from the various comments received, the materials and information presented were worthwhile and served as a good starting point in exploring and learning about the visually impaired.

I look forward to hearing from you.

Sincerely,

Barbara Rutberg
Barbara Rutberg, M. Ed., CCC
Speech and Language Therapist
Team Leader

BR/aag

cc:

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Kennedy-Donovan Centers at:

Foxboro	Hanson	New Bedford	Ashland	Milford
South Street and Carpenter Road	Route 27 Main Street	Ingraham School 80 Rivet Street	75 Central Street	11 Jefferson Street
3-2542 543-2543	294-8064 294-8065	992-4756	881-5211	478-34

The Commonwealth of Massachusetts
Executive Office of Human Services
One Ashburton Place, Room 1109
Boston, Massachusetts 02108

Philip W. Johnston
Secretary

July 3, 1984

Sherry Raynor, President
International Institute for the Visually Impaired
14 Gay Street
Newtonville, MA 02160

Dear Ms. Raynor:

Governor and Mrs. Dukakis have designated James Gleich, Director of Handicapped Affairs, to be their representative to the International Institute for the Visually Handicapped. Mr. Gleich's address is:

James Gleich, Director
Office of Handicapped Affairs
Room 303
One Ashburton Place
Boston, MA 02108

Both Governor and Mrs. Dukakis are pleased to continue as honorary chairpersons of the Institute and Mr. Gleich will keep them informed of all events and news related to the organization.

Sincerely,

Philip W. Johnston

Philip W. Johnston
Secretary

PWJ:SM/mtr

MANNING HALL
1856

Alabama Institute for Deaf and Blind

205 E. South Street P.O. Box 698
Talladega, Alabama 35160
Tel: 205 / 362-1500

Office of Field Services

January 9, 1984

Mrs. Sherry Raynor, Director
International Institute for Visually Impaired, 0-7, Inc.
14 Gay Street
Newtonville, Massachusetts 02160

Dear Mrs. Raynor:

The administration and staff of the Alabama Institute for Deaf and Blind would like to express appreciation to you and your colleagues for participating in the recent statewide needs assessment of visually impaired preschool children. Inclusion of information and requests from the Alabama Institute for Deaf and Blind and additional state agencies such as the State Department of Education, Headstart Programs, State Crippled Children Services, and Vocational Rehabilitation Services presented a valid representation of current services and programs available in the State of Alabama.

Utilizing the expertise of the International Institute for Visually Impaired, state program personnel were able to examine the results of the needs assessment and identify those issues relevant to implementing an organized and constructive program of staff development and service delivery to the visually impaired preschool child and his/her family.

Enclosed is a Memorandum of Agreement indicating mutual expectations of the February Workshop. Please indicate to us any additional information or needs you or your staff would find useful. We are looking forward to the follow-up session scheduled for February 10, 11, and 12, 1984.

Sincerely,

Terry Graham

Terry Graham
Director

TG/bko

cc: Dr. Douglas C. Patterson

Enclosure

APPENDIX F

International Institute for Visually Impaired, 0-7, Inc.
(BIRTH TO SEVEN)

NEWS RELEASE

Re: The first statewide conference for parents of blind or visually impaired preschool children.

Saturday, November 5, 1983,marks the first statewide meeting of the Early Years Education and Support group, the Massachusetts organization for parents of preschool or visually impaired children.

This day-long workshop will provide an opportunity for parents and professionals to share information, challenges, frustrations, and accomplishments.

The conference will be held at the Daniel L. Joyce Junior High School in Woburn. The Woburn Lions Club has arranged a luncheon for the participants and child care will be provided by students from Boston College.

The conference will begin at 9:30 a.m. and will continue until 4:00 p.m. Registration is requested in advance, if possible. The registration fee is $5.00 for individuals and $10.00 for families.

In order to register or for further information, please write to:

International Institute for
Visually Impaired, 0-7, Inc.
14 Gay Street
Newtonville, MA 02160

OR CALL: (617) 527-0476

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14 Gay Street, Newtonville, Massachusetts 02160-2213 617/527-0476
Mich MICS #9400/Mass A G Act #14502/Fed I D #38 2226033

BOARD OF TRUSTEES Sherry Raynor Donna Heiner Jackie DeNike

How To Reach Perkins By Car

[illegible]

From Logan Airport, Boston

[illegible]

From Trailways and Greyhound Terminals, Boston

[illegible]

From Back Bay Station, Boston

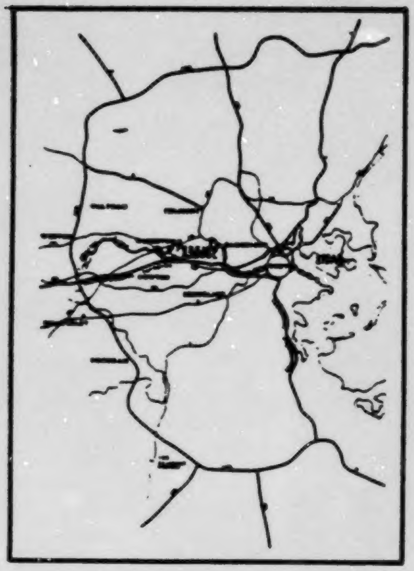
[illegible]

From South Station, Boston

[illegible]

From North Station, Boston

[illegible]



PLEASE FILL OUT ATTACHED REGISTRATION FORM AND ENCLOSE REGISTRATION FEE OF $10.00 per FAMILY *

MAIL FORM and FEE in enclosed envelope to:

Tom Miller, Preschool Services
Perkins School for the Blind
175 North Beacon Street
Watertown, MA 02172-9982

RETURN BY:

March 22, 1984

Family Name: ______________________________

Telephone:
Home: ______________

Business: ______________

Address: ______________________ City: ______________ State: ____ Zip: ________

Number of family members attending:

PLEASE FILL IN INFORMATION BELOW:

Mother's Name: ______________

Father's Name: ______________

	Age	Sex	Blind	Visually Handi-capped	Physically Handi-capped	Deaf
Children's Name(s) ______________	___	___	___	___	___	___
______________	___	___	___	___	___	___
______________	___	___	___	___	___	___
______________	___	___	___	___	___	___

Please note any other special considerations we should be aware of concerning your child (e.g. medication or physical problems). ______________________________

____

Date: ______________ Signature of Parent/Guardian: ______________________

Do you require assistance in arranging overnight accommodations? Yes____ No____**

* Please call contact person from your state if you are unable to pay but wish to attend.

** We will try to arrange overnight accommodations at no or minimal cost for those families who have no other alternatives.

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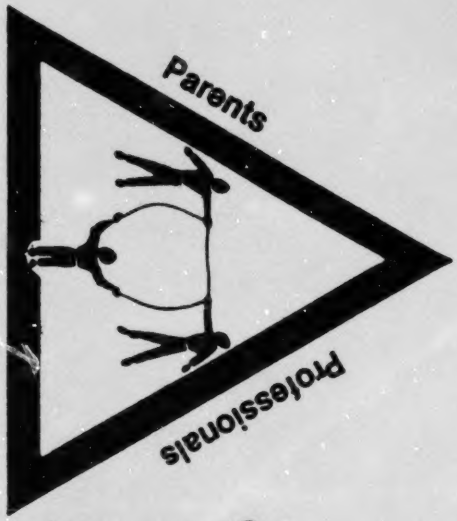
Taking Care of our Children . . .
Taking Care of Ourselves



APRIL 7, 1984

PERKINS SCHOOL FOR THE BLIND
175 North Beacon Street
Watertown, MA 02172-9982

Presented by
New England Regional Seminar for Families of Visually Handicapped Preschool Children—Ages 0-7

Sponsors to Date:
Massachusetts Commission for the Blind
Perkins School for the Blind

159

AGENDA

9:30-10:30 REGISTRATION and REFRESHMENTS

10:30-12:00 CONCURRENT SESSIONS

Session A: PARENT/PROFESSIONAL PARTNERSHIP??

Panel Presentation:

Parent: a.m. - Jill Montoni - Massachusetts Parent
p.m. - Pat Mangini - Connecticut Parent

Pediatrician:
a.m. - Marianne Goldsmith, M.D. Watertown Health Center
p.m. - Carla Cohen, M.D. Mass. General Hospital

Ophthalmologist:
David S. Walton, M.D.

Educator: Robert Long, Board of Education and Services for the Blind, Connecticut

Moderator: Mary Morse, Director MICE Project, New Hampshire

Questions:

1. What you, as parent, can expect from the professional?
2. What we, as professionals, can expect from you as parents?

Session B: SIMULATION AND LOW VISION TRAINING:
William Padula, O.D., Connecticut

1:00-1:30 LUNCH (with children)

12:00-1:00 KEYNOTE SPEECH: CHILD/PARENT RIGHTS UNDER P.L. 94-142
Judith Raskin, Executive Director
New Hampshire Information Center

2:00-3:30 CONCURRENT SESSIONS

Session A: PARENT/PROFESSIONAL PARTNERSHIP??
Panel of Parent, Physician, Ophthalmologist, and Educator

Questions:

1. What is role of professional in coordination of process to ensure child's comprehensive care?
2. With whom does the professional communicate and what is the process of communication?
3. How does professional communicate with and support parents?

Session B: SIMULATION AND LOW VISION TRAINING
(repeat of a.m. Session B)
William Padula, O.D., Connecticut

Session C: FAMILY COMMUNICATION
John Morse, Ph.D., New Hampshire

3:30-4:30 WHERE DO WE GO FROM HERE?

- state by state parent group meetings
- summary of day's activities
- future needs and directions

SPANISH INTERPRETERS WILL BE PROVIDED

Activities and child care services will be provided for your children and their brothers and sisters throughout the day.

We encourage parents of visually-handicapped children (ages 0-7) throughout New England to come and participate in this opportunity to share our common concerns and to learn from one another. To aid your participation, child care staff will be available to care for and provide activities for your children throughout the day. We ask only that you do the following:

- Bring and administer your child' medication.
- Label your child's clothes, toy and/or special equipment.
- Bring any special equipment (cri highchair, wheelchair) and food or feeding equipment which your child may require. Kitchen area will be available for you to hea foods for children with special dietary needs.
- Assume responsibility for all damages by family members.

FOR MORE INFORMATION, PLEASE CONTACT THE FOLLOWING PERSON WITHIN YOUR

STATE	CONTACT PERSON	TELEPHONE NUMBER
Massachusetts	[illegible]	[illegible]
Rhode Island	[illegible]	[illegible]
Connecticut	Connecticut Parents' Association	[illegible]
New Hampshire	[illegible]	[illegible]
Vermont	[illegible]	[illegible]
Maine	[illegible]	[illegible]

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EYES
International Institute for
Visually Impaired, 0-7, Inc.
14 Gay Street
Newtonville, MA 02160

IIVI

INTERNATIONAL INSTITUTE FOR VISUALLY IMPAIRED, 0-7, INC.

OFF TO A GOOD START!

A Workshop for Parents of
Young Blind and Visually
Impaired Children.

Saturday, November 5, 1983

Sponsored by:

EYES

Early Years Education and
Support Group

I. I. V. I.

GENERAL INFORMATION

Early Years Education and Support Group (EYES) of the International Institute for Visually Impaired, 0-7, Inc. is the state of Massachusetts group for parents of young blind and visually impaired children. EYES has been formed for the purpose of:

(1) Reaching out to parents of newly diagnosed visually impaired children.
(2) Developing materials for parents, such as the Parent Resource Manual.
(3) Serving as a Resource Center for information important to families who are raising preschool visually impaired children.

PURPOSES OF THIS WORKSHOP

The primary purpose of this workshop is to provide an opportunity for parents of infants and young blind children to meet to share information, challenges, frustrations, and successes. This is an all day workshop designed by parents for parents. Panel members are parents of young visually impaired children themselves. Consultants have been invited to lend their expertise.

In addition, it is hoped that the workshop will be an opportunity to learn more about resources available around the state.

* * * * *

Child care will be provided under the supervision of Boston College students in special education.

AGENDA

9:30 - 10:15 Registration
10:15 - 10:30 Greetings
10:30 - 12:00 Concurrent Sessions
Session A: Let's Get Started! Dr. Marguerite Smith and parents Dan and Linda Ward and Harry and Charlotte Forbes will lead a discussion for parents of the birth to three year olds.
Session B: Your Child is Going to School...Wow! Mary Keefe and parents Paul and Susan Carson and Diane Bourdeau will focus on the preschool experience.
12:00 - 1:00 Lunch
1:00 - 1:30 Keynote Address: "Parents - The Best Teachers" by Sherry Raynor, President International Institute for Visually Impaired, 0-7, Inc.
1:30 - 2:15 Adapting Spaces in the Home and School. Sue Crones, Environmental Facilitator and Diana Cuthbertson, parent.
2:15 - 3:00 Toys: Learning Tools. Peggy Gorse, parent and Julie Urban, teacher will lead a discussion. Parents are encouraged to bring toys their visually impaired children enjoy to this meeting.
3:00 - 4:00 Establishing parent groups around the State.' Small group discussions. Directions for the future will be set in a short summary meeting near the end of this hour session.

* * *

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SPEAKERS

Harry and Charlotte Forbes, Wrentham, parents of two year old David, who attends Perkins Preschool Services.

Dan and Linda Ward, Hanson, parents of Kelly. age six in the Kindergarden at the Hanson Public Schools and Heidi, age two, who attends Perkins Preschool Services.

Dr. Marguerite Smith, Woods Hole, Developmental Psychologist in private practice and Consultant to IIVI Project Outreach USA. Colleague of Selma Fraiberg working with blind infants. Recent work has been with multihandicapped and blind children.

Paul and Susan Carson, Billerica, parents of Mark, age 5, who attends kindergarden in Billerica Public Schools.

Diane Bourdeau, Chicopee, parent of Angela, age six, in kindergarden in Chicopee Public Schools.

Mary Keefe, Jamaica Plain, staff Project Outreach USA and former director Vision Resource Services, Boston Public Schools.

Sherry Raynor, Newtonville, President of IIVI, Project Outreach USA Director. Parent of Beatrice, 20 years old, who attends Michigan State University.

Sue Crones, Newton, Adaptive Educational Design Consultant. Facilitated adaptations for Perkins Preschool and designs outdoor as well as indoor facilities for day care centers, residential settings, public and private schools.

Diana Cuthbertson, Boston, parent of Kate, age 3, who attends Thom Montessori Preschool. Parent Coordinator Project Outreach USA.

Peggy Gorse, Dedham, parent of Michael, age 3, who attends Norwood Cooperative Nursery.

Julie Urban, Roslindale, parent of Rebecca, age 7, student in the Boston Public School Vision Resource class. Educational Coordinator Project Outreach USA.

* * * * *

DETAILS

Place: Daniel L. Joyce Junior High School, Woburn. Take Exit 41 S off Rt. 128 (Rt. 3 Winchester). After second set of lights take first left on to Locust. The school is a half mile down Locust Street.

Child Care: If you are planning to bring children with you, please let us know of their special interests and any handicapping conditions. Attach a brief note to the registration form.

In order to protect the confidentiality of their clients, the Commission for the Blind will distribute invitations to the parents of the birth to three year olds. The Itinerant Teachers will invite the parents of preschoolers.

Fee: $5 for the individual, $10 for families regardless of number of members. Please make check payable to IIVI-EYES.

Further Information: Please phone 617-527-0476.

Professionals are welcomed.

Registration: Please fill in attached form or telephone IIVI.

NAME: ______________________________

ADDRESS: ______________________________

____

PHONE: ______________________________

Number of Adults ____________________

Number and Ages of Children __________

____

MAIL TO: International Institute for
Visually Impaired 0-7, Inc.
14 Gay Street, Newtonville, Mass. 02160

THE EYE RESEARCH INSTITUTE OF RETINA FOUNDATION
&
THE WAR AGAINST BLINDNESS

FOREWORD

From the chronicles of the Old Testament, through Homer, Sophocles, Shakespeare to our own times, great dramatists, poets, and novelists depict the loss of sight as the most horrendous and pitiful fate that can befall a human being. Indeed blindness is referred to frequently as "a fate worse than death."

Our personal attitudes toward blindness are extremely complex, rooted as they are not only in a substantial body of religious and classic literature, but in myth, folklore, and other aspects of our cultural heritage.

Until recent times, the United States had a relatively low incidence of blindness. "Going blind" was considered incurable and the inevitable toll of old age. When blindness did strike someone we knew, our attitude was curiously passive compared to our outrage toward "killing" diseases. As a nation we can no longer afford this attitude. **Blindness and severe visual impairment, often curable and preventable, affect an increasing segment of our population.**

Within a generation, if nothing more is done than at present, there will be few families in the United States that will not have to deal with the tragedy of blindness. Among the young—among the aging.

As we have waged war with increasing success on other diseases through medical research, we must wage war on blinding eye diseases.

At the Eye Research Institute of Retina Foundation, we have been waging this war for over a quarter of a century. We have had many victories but the greatest battles lie before us.

"The Light of the Body is the Eye."
Mathew VI 22

"...for thou wert better dead than living and blind".
Sophocles, Oedipus Rex

"...for which all the discomforts th will accompany my being blind the good God prepare me."
Samuel Pepys, Diaries, Last Entry

"The case for the elimination of unnecessary blindness is justified not only on humanitarian grounds but also by its social and economi consequences. ***In terms of econor loss, blindness is the most expens of all causes of serious disablemer***
The World Health Organization, Geneva, 1972.

"Loss of sight is a dying."
Father Thomas J. Carroll.

THE EYE RESEARCH INSTITUTE OF RETINA FOUNDATION
&
THE WAR AGAINST BLINDNESS

FRIGHTENING FACTS

Corneal Diseases

Throughout the world, diseases of the cornea are probably the leading cause of blindness. In many instances both the cause and cure of the diseases are unknown to medicine. In the United States, damage to the cornea by disease and physical injury is a major cause of blindness. There are 300,000 cases annually of corneal scarring caused by the Herpes Simplex virus that can lead to blindness.

Glaucoma

Glaucoma is characterized by the build up of excessive pressure within the eye which destroys vision. The most common form of glaucoma, which affects over two million Americans, is also the most insidious. Visual loss occurs slowly, painlessly, and is irreversible. Most cases of glaucoma can be controlled by medication; other forms must be treated surgically. The fundamental cause of glaucoma remains unknown.

Cataract

The word "cataract" describes a clouding or opacity of the normally clear crystalline lens of the eye. While the classic operation for the removal of cataract is one of the safest surgical procedures known, the great number (400,000) of cataract operations performed in the United States annually represents an enormous cost to the American people. In under-developed countries of the world, the number of people totally blind from operable bilateral cataract is estimated at 17 million. Unable to work, most of these victims are doomed to slow death from starvation.

- *No one really knows how many blind Americans there are. Official census records show there are over 500,000 legally blind.*

- *In addition there are over 1,500,000 Americans functionally blind. This means they cannot see to read this message, even with glasses. Whether one is legally or functionally blind, the difficulties in economic survival and living a useful and pleasurable life are considerable.*

- *More Americans are going blind than ever before: Older Americans who are living longer because of advances in medicine, younger Americans with genetic tendencies to blindness producing diseases, who might not have been born or would not have survived thirty years ago.*

- *The largest single cause of new blindness in America is diabetes. While new methods of treatment for diabetic retinopathy offer hope for some, the number of (long term) diabetic blind could reach 500,000 within the next generation. That's equal to the total number of U.S. people legally blind today!*

- *Among our rapidly increasing population of older citizens, the problem of blindness and severe visual impairment is particularly oppressive. Three out of four of the reported 670,000 cases of macular degeneration are among people over 65. However, in healthy people over 50, increasing numbers are losing their ability to read, recognize faces, colors, drive a car, or do useful work because of macular disease. An overwhelming majority of cases of retinal detachment, cataract, and glaucoma occur in older people.*

- *Visual problems are on the increase among children—about 56 million children today. It is estimated that this figure will increase to 75 million by 1980.*

- *500,000 major eye operations are performed annually. The cost is staggering. The annual cost of cataract surgery alone is over $500,000,000.*

- *The direct cost of blindness and severe visual impairment is conservatively estimated at 7 billion dollars. Annually! This does not include the indirect burdens to the economy of loss of productivity and wage earning, loss of tax revenue, cost of insurance, government assistance, rehabilitation, etc. These costs approach three billion dollars annually.*

- *Accidents account for only 3% of all cases of blindness. The underlying causes of most eye diseases are still unknown.*

- *For every dollar that blindness costs our society, only one cent is spent in research to prevent blindness.*

comprehend the magnitude and seriousness of child blindness throughout the world;

Blindness is a tragedy which limits the horizons of millions. For the sighted, it is difficult to comprehend the ultimate meaning of blindness and to identify with the many ways blindness isolates an individual from the life of the community.

The incidence of childhood blindness is a global issue. It is difficult to assess the full extent of the problem since statistics are often unreliable and incompatible and since definitions of blindness vary.

No child should go blind needlessly. Much of this world's blindness is avoidable. Malnutrition, infections (such as trachoma), cataracts, and accidents are the leading causes of preventable or easily curable blindness among children in developing countries.

- Blindness is on the increase, and by the year 2000, the number could double.

COUNTRY	REGION	TOTAL NO. OF BLIND PERSON: PER 100,000
Malawi	Africa	720
Ethiopia	Africa	150-300
Kenya	Africa	1,050-1,150
Argentina	Americas	80-90
Cuba	Americas	970
Mexico	Americas	100
United States	Americas	215
Japan	Asia	250
Yemen	Asia	4,000
Saudi Arabia	Asia	3,000
Pakistan	Asia	1,000
Belgium	Europe	50
Fed. Republic of Germany	Europe	60
England, Wales	Europe	200
Australia	Oceania	220
Polynesia	Oceania	145

understand that blind children, when given adequate education and training, can develop their capabilities to become productive and self-fulfilled adults;

analyze solutions to the problems of improving the lives of blind children and apply these solutions to new situations;

What is integrated education? What benefits do blind children derive from integrated education? Sighted children?

What preparation do teachers need to successfully create integrated education experiences?

Within the context of an integrated education, what special education experiences do blind students need (e.g., mobility training, Braille, etc.)?

Integrated schools play an important role in opening education to the blind children. This concept affords blind students the opportunity to study and play competitively with their sighted classmates.

Rehabilitation plays a central role in helping the blind child achieve independence and full participation in the community.

Only a few blind children in the world today receive rehabilitation services, yet even limited, inexpensive, rehabilitation techniques will help a blind child lead a more independent, secure and productive life. This film contrasts the

empathize with the problems facing blind children and their families.

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Science Times
The New York Times
With Education, Arts
C1

Tues, Feb. 28, 1984

Terrible!

THE DOCTOR'S WORLD

Premature Children Show Rise in a Baffling Eye Disorder

By LAWRENCE K. ALTMAN, M.D.

DOCTORS in the United States and abroad are increasingly concerned about the incidence of a disorder in premature newborns hat often leads to blindness.

The number of infants involved is not reat compared with many other afflictions, ut the tragedy is real and growing.

From relatively few cases a decade ago, he estimated number of infants legally linded by the disorder, called RLF, for retolental fibroplasia, has risen to more than 00 a year in this country.

An additional 1,500 children each year lose art of their eyesight to RLF. And the numers may be higher, because doctors are not equired to report the disorder to any dataathering body.

RLF, in what has turned out to be the secod outbreak of its kind, appears to have urpassed all other causes of blindness in ewborns combined. The first outbreak egan about 1943, continued until 1955 and fially abated.

The new surge, in addition to the tragedy t brings to children and their parents, now oses one of the most perplexing problems ediatricians have faced in years, according) interviews and a review of the medical litrature.

Until recently, doctors were certain they ad solved the problem of RLF. They beeved that the administration of high conentrations of oxygen for prolonged periods oon after birth damaged the eyes of infants orn prematurely, ultimately detaching the etina.

Accordingly, the use of oxygen in nursries was strictly curtailed, and this led to a arked reduction in the number of cases. ndeed, the link between oxygen and RLF

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The Commonwealth of Massachusetts

By His Excellency

MICHAEL S. DUKAKIS

Governor

A PROCLAMATION

1983

WHEREAS: This is the decade for the disabled; with full participation and equality as its central theme; infant and young blind and visually impaired children should not be forgotten, they too are entitled to fully experience childhood, gain independence and have the opportunity for the fulfillment of dreams as all Americans; and

WHEREAS: There are an increasing number of children born with severe visual problems or total blindness; and

WHEREAS: The greatest amount of all knowledge for the young child is acquired visually; and

WHEREAS: Parents are considered the first teachers; and

WHEREAS: Parents and teachers seeking to assist these children are in need of a central resource; and

WHEREAS: The International Institute for Visually Impaired, Birth to Seven, Inc., a Massachusetts charitable organization, is the only organization in the world devoted solely to the collection, development, and dissemination of information, materials and services for infant and young blind or visually impaired children; and

WHEREAS: The International Institute for Visually Impaired, Birth to Seven, Inc. is to be commended for its efforts to create an atmosphere of public awareness of the needs of these children and for their efforts to assist others in the development of services through the dissemination of information to parents and agencies;

NOW, THEREFORE, I, MICHAEL S. DUKAKIS, Governor of the Commonwealth of Massachusetts, do hereby proclaim the week of November 5th, 1983 as

IIVI BLIND BABY WEEK

and that it be dedicated to activities to create greater public awareness of the needs of these children, services available for parents and the planning and initiation of activities to support the International Institute for Visually Impaired, Birth to Seven, Inc. in their work on the behalf of these, our children, worldwide.

Given at the Executive Chamber in Boston,
this twenty-eighth day of October, one thousand
nine hundred and eighty-three, and of the
Independence of the United States of America,
the two hundred and seventh.

By His Excellency the Governor

MICHAEL S. DUKAKIS

MICHAEL JOSEPH CONNOLLY
Secretary of the Commonwealth

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GOD SAVE THE COMMONWEALTH OF MASSACHUSETTS

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Volume 3 Number 2

What's Happening...in Massachusetts

The International Institute for Visually Impaired, Birth to Seven, Inc. received the boost it needed when it was presented with a one year grant award from the Federal Government to implement Project Outreach USA.

With Project Outreach USA, the Institute will be assisting and guiding parents, professionals, and others through literature and materials; informational and training seminars; helping to develop or improve local programs; and providing general support based on experience, education and concern.

According to Sherry Raynor, President of the Institute, who recently resigned as Supervisor of the Infant-Toddler Program at Perkins School for the Blind to devote her full attention to this vital program, "It's just a beginning...this service is essential and has been desperately needed. Parents and teachers need help because blind children must be systematically taught what sighted children seem to learn automatically."

Volunteers and local organizations and many agencies throughout the world have been most helpful to the work of the Institute...but there's still a long way to go!

The Institute is the only organization in the world devoted solely to the collection, preparation, and dissemination of information regarding materials and services for blind and visually impaired infants and young children.

Further information about the Institute and PROJECT OUTREACH USA can be obtained by writing the Massachusetts office of the International Institute for Visually Impaired, 0-7, Inc., at 14 Gay Street, Newtonville, Massachusetts, 02160 or by calling (617) 527-0476 between 9:00 a.m. and 4:30 p.m.

Continued on page 6

Causes of Visual Impairment in Young Children: Glaucoma

(The following is meant to provide a general overview of one cause of vision loss in young children. For specific information regarding your child's impairment, consult your ophthalmologist.)

Definition: Glaucoma results from increased pressure within the eye which, if untreated, damages the retina and the optic nerve. Primary congenital glaucoma (infantile) results from abnormal development of the eye's drainage system.

Cause: The aqueous humor is a clear fluid inside the front chambers of the eye. Because its purpose is to nourish the cornea and the lens, aqueous is continually produced by the body. The excess aqueous must be drained off in order to maintain a constant pressure within the eye. If the eye's drainage system does not function properly, the excess fluid remains in the eye and pressure builds up.

Glaucoma is sometimes inherited; parents should obtain genetic counseling.

Treatment: Congenital glaucoma (glaucoma present at or soon after birth) generally requires immediate surgery to lower pressure and save remaining vision. Children with congenital glaucoma will require continuing supervision by an ophthalmologist; parents may be taught to recognize symptoms of increased pressure within the eye in order to alert the doctor. Some children are treated with prescription eye drops to control the pressure.

Functional Implications: Children with congenital glaucoma usually have some degree of vision loss. Most common is loss of peripheral vision, or loss of vision to the sides, top, and bottom. The

Continued on page 6

What's Happening in...Massachusetts

Continued from page 1

Early Years Education and Support Group (EYES) of the International Institute for Visually Impaired, 0-7, Inc. is the state of Massachusetts group for parents of young blind and visually impaired children. EYES has been formed for the purposes of:

—reaching out to parents of newly diagnosed visually impaired children.

—developing materials (such as the Parent Resource Manual) for parents.

—serving as a Resource Center for information important to families who are raising preschool visually impaired children.

Michael S. Dukakis, Governor of Massachusetts, proclaiming week of November 5th, 1983, as "IIVI Blind Baby Week"

EYES held its first workshop for parents of young blind and visually impaired children on November 5, 1983. The all-day workshop, designed by parents for parents, featured parents of young visually impaired children and several consultants who shared their knowledge with the group.

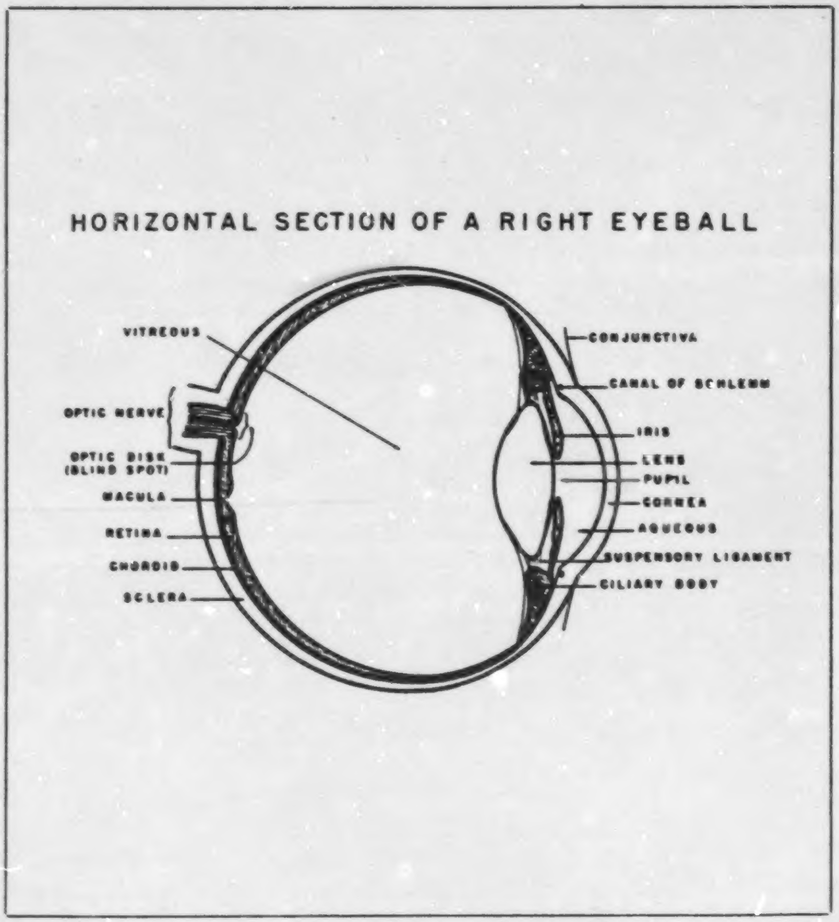
EYES first meeting coincided with the opening day of a week-long observance of "IIVI Blind Baby Week," proclaimed by Governor Michael S. Dukakis of Massachusetts.

Causes of Visual Impairment

Continued from page 1

child may be able to see well only objects and people which are directly ahead. Moving about may be difficult at first because the child may bump into objects outside of the visual field. To gain an appreciation of the significance of a peripheral field loss, cut a paper towel tube in half and hold a half up to each eye...look at print in a book, food on a plate; walk about your house, walk up and down a flight of stairs (carefully!). You will find that walking and climbing stairs are difficult. To compensate, children must learn to shift their gaze frequently or move their heads more than is usual.

Special thanks to Dr. Donald E. Glanton for reviewing our series on causes of visual impairment of young children.



HORIZONTAL SECTION OF A RIGHT EYEBALL

Shown here, discussing the federal grant, from left: Dorothy Reichard, epresenting Cong. Barney Frank, Newton Mayor Theodore D. Mann, Diana Cuthbertson and daughter Katy, Sherry Raynor, president of the institute. Mayor Mann and Cong. Frank, are supporters of the work done by the institute.

Intstitute for Visually Impaired receives grant

NEWTON — The International Institute for Visually Impaired, Birth to Seven, Inc., has received one-year grant from the federal government to implement "Project Outreach USA."

Project Outreach will assist and train parents, professionals and all those concerned with the development of blind and visually impaired infants and young children.

According to Sherry Raynor, president of the Institute, who recently resigned as Supervisor of the Infant-Toddler Program at Perkins School for the blind to devote her full attention to this vital program, "It's just a beginning...this service is essential and has been desperately needed. Parents and teachers need help because blind children must be systematically taught what sighted children seem to learn automatically."

The institute is devoted solely to the collection, preparation and dissemination of information, materials and services for blind and visually impaired infants and young children.

For information contact International Institute for Visually Impaired, 0-7, Inc., 14 Gay Street, Newtonville, 02160 or call 527-0476 between 9 a.m. and 4:30 p.m.

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THE NEWTON VILLAGER and TRANSCRIPT THURSDAY, NOVEMBER 17, 1983

THE INTERNATIONAL INSTITUTE for Visually Impaired recently a one-year federal grant to implement "Project Outreach USA". The program will assist and train parents, professionals and all those concerned with the development of blind and visually impaired infants and young children. Discussing the grant are: (left to right) Dorothy Reichard, district manager, Congressman Barney Frank, Mayor Theodore Mann, Diana and Kathy Cuthbertson, and Sherry Raynor, President of Project Outreach. For more information call 527-0676.

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Proclamation cites work by institute for blind kids

NEWTON — Governor Michael S. Dukakis has signed a proclamation marking this week "IIVI Blind Baby Week" in the Massachusetts.

The governor's proclamation includes a commendation of the Newtonville-based International Institute for Visually Impaired, Birth to Seven, and a Michigan-based charitable organization, for their work with blind children.

The Newton-based institute is the only organization in the world devoted soley to the collection, development and dissemination of information, materials and services for infant and young blind and visually-impaired children.

The opening day of the observance coincides with the first statewide meeting of the Early Years Education and Support group (EYES), a new Massachusetts organization for parent sof preschool blind or visually-impaired children. EYES, a voluntary project, was founded by the Institute to begin to provide much-needed information, resources, and support to parents as soon as possible after the birth of a blind or visually-impaired child.

Until recent years, parents of children born with slight impairment to turn for help. Sherry Raynor, president of the institute, is the mother of a 20-year-old daughter who was born blind. Raynor sys her sense of isolation during her daughter's infancy, combined with her training and experience as a teacher of children with handicapping conditions, prompted her to seek ways to help other parents in similar circumstances.

Raynor's experiences led to the founding of the institute.

Raynor came to Massachusetts in 1979 to join the staff of the Perkins School for the Blind in Watertown. She initiated their preschool program for visually-impaired children and then secured a federal grant to include services at Perkins for infants and toddlers.

Raynor is now working full time with the institute and oversees the work of a corps of volunteers who contribute to this international effort to assist parents and teachers of infant and young blind children.

Recently, the institute was awarded a one-year federal grant to fund Project Outreach USA to assist others to develop or improve services for young blind and visually-impaired children. The Infant-Toddler program Raynor developed at Perkins is the Model Demonstration Site for the Outreach project of the Institute.

The first conference of the Massachusetts EYES organization for parents of preschool blind children was held last week at Daniel L. Joyce Junior High School in Woburn.

Further information about the institute and its work may be obtained by writing or calling The International Institute for Visually Impaired, 0-7, Inc., 14 Gay St., Newtonville, 02160, 527-0476.

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BULLETIN #1

VIP

The Newsletter of the
International Institute of Visually Impaired, 0-7, Inc.
14 Gay Street, Newtonville, MA 02160-2213

VISUALLY IMPAIRED PRE-SCHOOLERS

Approximately one-half million preschoolers throughout the world lose their vision each year — and, at best, we reach only 50,000 to 100,000 (20%) of these children with any kind of evaluation, education and support. It is difficult to speak of projects completed in light of such extensive need; yet, it is important to review some of the work that has been done this year by the Institute (fondly known as IIVI).

We would like to share with you, our friends and supporters, our most recent accomplishments.

NEW GRANT

Project Outreach, U.S.A., a federal grant which IIVI applied for, has been funded. The purpose of this grant is to assist others to develop or improve services for young visually impaired children. Project Outreach, U.S.A. is another important beginning; however, the funding is only for one year. We must secure ongoing funding. *Please continue to keep your congressman aware of the need* for early intervention and services for our children.

SECOND INTERNATIONAL SYMPOSIUM (1983, Aruba)

The Second International Symposium on Visually Handicapped Infants and Young Children, Birth to Seven, took place in Aruba from May 22 to 27, 1983. The Symposium, sponsored by the Institute (U.S.A.) and the Fundashon Arubano di esnan Visualmente Incapacita (Aruba), was a great success. Over 200 participants from 30 countries came together to share their many ideas and strategies for reaching out to visually impaired children and their parents. For many, this is their life work. It was truly inspirational to hear them speak of the challenges they encounter. Sixty-two papers were presented. Funds are now needed to publish the Proceedings and to edit the videotapes of sessions for distribution.

FIRST INTERNATIONAL SYMPOSIUM

Perkins School for the Blind, in Watertown, Massachusetts, is publishing the Proceedings from the First International Symposium in Israel. The Proceedings represents the combined knowledge of an international group of educators and parents, and will be a valuable addition to your library about preschool visually impaired children. Contact the IIVI offices for information for ordering the First Proceedings.

IN MASSACHUSETTS . . .

Parent Group for Preschool — A Massachusetts Parent Group has been formed. The Massachusetts Commission for the Blind and the Massachusetts Itinerant Teachers of the Visually Impaired have agreed to distribute a letter of introduction to all known parents of visually impaired young children, birth to seven, in the state.

The Massachusetts Parent Group has begun work on a Parent Resource Manual for the State. Another planned project is a Baby Sitting Manual for Visually Impaired Children. The first all day meeting and inservice will be held November 5, 1983 in Woburn, Massachusetts. For information, write the Massachusetts IIVI office, Attention: Diana Cuthbertson.

LIONS CLUBS

The Massachusetts Lions and Lionesses continue to be a tremendous source of support for IIVI. At this time, we wish to acknowledge contributions from the Ludlow Lioness Club and the Woburn Lions. The Lions of District 33-K have proposed a grant to the Lions Club International Foundation to support the work of IIVI. If funded, this proposed grant will greatly increase our ability to provide others with materials and information.

New Preschool Services — We have accomplished our goal of beginning a preschool program in a stable agency. In 1979, Sherry Raynor, President of IIVI, went to the Perkins School for the Blind to begin their Preschool Program for children age three through five. Since services for below age three are not mandated in Massachusetts, a federal proposal was written for Perkins and was funded for three years to initiate an Infant-Toddler Program. Perkins School for the Blind continues to provide these services as a part of their Preschool Program for children from birth to five. Sherry has left Perkins to devote full time to developing additional resources through the Institute.

IN MICHIGAN . . .

In Michigan, the IIVI office is headed by Donna Heiner, Vice President. It serves as a clearinghouse for information on visually impaired infants and young children. Daily letters are received from parents and teachers searching for services and resources. Each letter receives an individual response or referral to an appropriate agency. Major contributors in Michigan this past year were the Lillian and Karl Scott Foundation and the Okemos Community Church

PARENT NEWSLETTER

The VIP (Visually impaired Preschoolers have Very Important Parents) Newsletter, which began in January 1979, reaches out to over 1,000 parents throughout the U.S., Canada and countries overseas. Subscriptions do not cover the costs of publication. Therefore, the VIP Newsletter depends on contributions from you for support.

EDUCATION

IIVI, on a regular basis, participates in and provides preservice and inservice teacher education. Donna continues to lecture and share experiences with students at Michigan State University — students who may soon be working with young visually impaired children and their parents. The IIVI is a regular presenter at the annual Michigan Educators of Visually Impaired Persons Conference, sponsored by the Michigan Department of Education. This provides an opportunity to share information and interact with teachers of the visually impaired in Michigan.

PUBLICATIONS

Get Ready . . . Get Set . . . Go! by Jan Schuch, *How to Make It: A Resource for Parents of Physically Disabled Children* by Glenda Prins, and the *Parent Packet*, a collection of reproducible materials about young visually impaired children, remain favorites of parents and teachers. The videotape *Move It* has been shown to many diverse groups. These publications are available by contacting IIVI, 0-7, Inc., 1975 Rutgers Circle, East Lansing, MI 48823.

IIVI, 0-7, INC. MEMBERSHIP

In the past few months, our membership has increased greatly. We now have individual and agency memberships from the United States, Belgium, New Zealand, Scotland, Canada, Israel, The Netherlands, Switzerland, The Netherlands Antilles, Australia, and Spain. Our goal for 1984 is 1,000 members. Send your membership to IIVI, 0-7, Inc., 1975 Rutgers Circle, East Lansing, MI 48823. (Individual Membership - $20.00, Agency Membership - $50.00).

IIVI is deeply grateful for the contributions which have been received and the volunteers who have given so many hours of their time to help us achieve the activities in this bulletin. Yet we urgently need additional funds to face the tremendous challenge before us. If you can personally give to the Institute or know of organizations who might be interested in supporting this important cause, do let us hear from you. Remember - with information and support, blind children can learn to live in a world they cannot see.

INTERNATIONAL INSTITUTE for VISUALLY IMPAIRED, 0-7, INC.

(BIRTH TO AGE 7)

NEWS BULLETIN NO. 2

PROJECT OUTREACH USA

The Institute has a one-year federal grant administered by the Handicapped Children's Early Education Program. The focus of the grant is to assist others in developing and improving programs for young blind and visually impaired children. The Outreach Project staff has been busy coordinating with other service providers and parents from around the country and has provided inservice education programs to Alabama, Kansas and Maine, as well as several sites in Massachusetts. Inservice program topics include assessment and curriculum planning for preschool blind and visually impaired children, parent support and parent activities, home teaching, adapting the environment, and many others. The requests for inservice continue to pour in each day.

GOVERNOR DUKAKIS PROCLAIMS I.I.V.I. BLIND BABY WEEK

His excellency, Michael S. Dukakis, Governor of Massachusetts, showed his support of the vital role I.I.V.I. plays as the only organization in the world devoted to the collection, development, and dissemination of information, materials, and services for infant and young blind and visually impaired children when he proclaimed the week beginning November 5, 1983 as I.I.V.I. Blind Baby Week. The proclamation acknowledged the work of the institute and declared that the week be dedicated to activities to create greater public awareness of 1, the needs of these children; 2, services available for parents; and 3, the planning and initiation of activities to support the Institute in its work on behalf of these children worldwide.

Families and professionals gathered at the Governor's office in the Massachusetts State House to hear the reading of the proclamation, to meet Governor Dukakis, and to receive his personal pledge of support.

FIRST STATEWIDE CONFERENCE LAUNCHES BLIND BABY WEEK

The first activity of I.I.V.I. Blind Baby Week was the convening of the first conference for families of preschoolers. A great success, the conference was held at the Joyce Junior High School in Woburn, Massachusetts, funded and co-sponsored by the Woburn Lions Club.

More than 100 parents, children and professional spent the day sharing concerns and brainstorming solutions regarding the difficulties of obtaining helpful information, material and services.

Child care was provided by occupational therapy students from Boston University and from high school students from DECA, the Distributive Education Club of America (Somerville, MA chapter). The fact that they did an excellent job was evidenced by the laughter which emanated from their part of the building throughout the day.

The parents felt they were "Off to a good start" which, coincidentally, was the title of the keynote speech delivered by Sherry Raynor, president of I.I.V.I.

PARENT RESOURCE MANUAL PRINTED

Parents from the Institute's Massachusetts family support group, Early Years Education and Support (E.Y.E.S.) have published the first edition of a resource manual identifying services for preschool blind and visually impaired children and their families, entitled *Off To A Good Start!*, (an apt title for many of our activities this year).

The introduction to the manual gives many suggestions that would be helpful to parents anywhere. The manual format itself might be useful as a guide for compiling a similar manual in your own state. If you would like to order a copy, contact Diana Cuthbertson at the IIVI Office in Massachusetts. Cost is $6.00 plus $1.00 for postage and handling.

A NEW BABY HAS BEEN DELIVERED

Weighing in at 5 lbs., 10 oz., baby is a grant proposal written by parents of preschool blind and visually impaired children with the help of IIVI staffers. It was delivered January 20, 1984 at 5:00 p.m. The Newton postal clerks assisted and made sure it was safely on its way to Washington.

E.Y.E.S. is seeking funding for a Model Demonstration Project from the Handicapped Children's Early Education Program. The proposal is to develop a model program for

(continued)

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NEW BABY *(continued)*

parents of preschool blind and visually impaired children. The project will focus on instruction for parents to help their children, the development of a family support system and as a resource center for information about services and materials available to preschool blind children and their families in Massachusetts. Now we must wait and see if the "baby" lives and grows.

AND A SECOND "BABY" IS ON THE WAY

No sooner was the first federal grant launched than the IIVI staff began work on a second grant to continue the work begun this year by Project Outreach U.S.A. Project Outreach U.S.A. is funded to provide information and assistance to develop or improve services for young visually impaired children. Plans are now being developed to provide direction for next year's work. The project has been inundated with requests from 22 states and the Mariana Islands to assist them with their programs for these children, since there are very few people trained to work with young blind and visually impaired children.

Your letters of support for this Outreach grant are always very helpful and keep us informed about the needs of the preschoolers, their families, and the professionals who work with them Please let us know about your inservice needs so that they may be considered and addressed in grant proposals as they are written.

NEW SLIDE TAPE

I.I.V.I. is working on a slide tape for UNESCO, delineating techniques to help parents work effectively with their young blind children. When completed this tape will be translated into many languages for international use.

FROM OUR MICHIGAN OFFICE

Donna Heiner, able and efficient skipper of our Michigan office is working with a group of students at Michigan State University to develop toys suitable for blind children. Donna is also preparing an article dealing with possibilities that blind children may be at risk for child abuse.

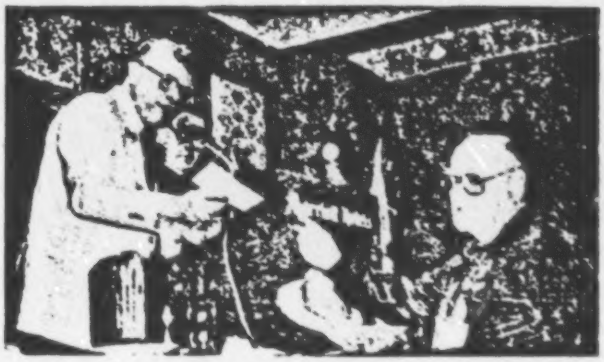
THE LIONS

The Massachusetts Lions continue to be a great source for the institute. The Lions grant proposal has been sent to the Lions International Foundation, asking for assistance to help blind and visually impaired children worldwide. The name of the project is Help for Preschool Blind, Worldwide. We are especially grateful to the Lions clubs of Arlington, Newton, Somerville and Woburn, Massachusetts and to Connie Mahoney, Bill Jones, Phil McGann, George Garrity, John Sullivan, Harold Zide, Scott Poole and Charlie Caliri for their continuous help and fundraising activities.

The latest contribution in Michigan was from the Lansing Lions Club.

Marriott
WE SERVE

Sherry Raynor addressing Massachusetts Lions District 33-K Midwinter Conference and Dist. Gov. Connie Mahoney *(seated)*.



The Somerville, Mass. Lions presented a contribution to I.I.V.I. at the Conference.

MEMBERSHIP

Our December mailing resulted in many new contributions. In addition to individual memberships, agency memberships have started to come in. This is extremely encouraging, for our needs are great.

Your continued support through membership and contributions is needed so that we may respond to the many requests we receive each week; as well as to continue to develop so that more materials and information can be made available to parents and teachers.

Please continue to enlist new members and to accept contributions. Send any amounts to either our Massachusetts address, 14 Gay Street, Newtonville, MA 02160 or to our Michigan office, 1975 Rutgers Circle, East Lansing, MI 48823. (Individual membership - $20.00; Agency membership - $50.00).

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ZION'S HERALD

Founded In 1823
As An Independent
New England
United Methodist
Newspaper

October 1983

Sherry Raynor's obsession

Giving the infant blind the best chance in life

By T.C. WHITEHOUSE

Sherry Raynor, a member of the United Methodist Church of Newton, has an obsession: she wants to see to it that every blind infant in the world — and there may be a million or more — has the best possible chance at life.

That obsession has its roots deep in her own experience. Twenty years ago her sixth child, a daughter, was born blind. The branches of that obsession are beginning to bear fruit: increased concern for infant blind through the establishment of an international organization devoted to their welfare.

Although Sherry was a teacher working with homebound children in Michigan, she faced daily the dilemma which she says all parents of such children face: how to respond helpfully to this special child.

Her search for help turned up very little in the way of resources or encouragement. She knows firsthand the loneliness of that experience, and she is determined that others in similar straits will be able to find help and support.

According to the various communities she checked on, there were no preschool blind children. But then, she started getting calls from people who knew about blind infants, asking if she would go and see them. So Sherry started visiting them on a volunteer basis during her lunch hour and after school hours.

When she had discovered five infant blind children, she asked the authorities if a special service could not be provided for them. The answer was a question, "Well, there aren't many, do you think we really need to?"

Sherry has her own answer, "No matter how few, to say that a life isn't important is wrong." Finally the school district allowed her to be teacher-consultant of physically handicapped children, with emphasis in the area of vision.

That gave her time to go visit the children as a professional. But what to say to the parents. "I have no expertise, no background except raising my own daughter and trying to find as much information as possible, but working together maybe we can find ways to help our children."

Basic to that hope was the understanding that blind children must be systematically taught what a sighted child often learns automatically.

Unique parental problems

Sherry pointed to the problems that parents of a blind child face. When parents have a child with normal sight, the child tells them what to do — the baby programs the parents. But the blind baby cannot do this. The inexperienced parent thinks, "Oh, I think baby is tired or sleepy; so I will lay him down," when what the child needs is stimulation at that point.

Unlike the sighted child whose arms start to fly when a parent approaches the crib, the blind child stops moving in order to listen to the approaching person.

Unless somebody who has experience intervenes and helps the parent of the blind infant interpret what is happening, the early years can bring retardation rather than development.

Sherry points out that people assume that sounds have meaning for blind children, but until the child makes a connection between the sound and the substance, there is no meaning. But, as Sherry put it, "If you give them enough experiences — tactually, auditorially, the way things smell, the ways things taste, they can put that together." She also points out that "anything we do develop for the blind child is good to use for any other child because it is an enriching experience, but everything people develop for other children we have to adapt for the blind child for almost always it is visual."

Sherry's hope is that the parents of infant blind children will develop a strong network of sharing of experiences and resources that will reduce the isolation many presently experience.

A long road ahead

Although intervention for handicapped children during the critical infant and preschool years has been advocated by experts for over 100 years, most efforts were directed to those from three to five.

As Mae Upperman of the Boston Center for Blind Children said, "As the three or four years are critical in the development of the greatest amount of

Early teaching is critical

"Blindness, absence of visual perception, may have a negative impact on the entire physical and intellectual growth of a child. Detrimental consequences may include retardation or malformation in the context of mobility, speech, thought and social behaviors. Such shortcomings, no doubt, will be obstacles to a smooth expansion of identity and to learning at school . . . If, however, the negative effects of blindness can be eliminated or mitigated by blindness-oriented teaching as early as in the first years of life, these children will enter school with the best possible fitness. That, after all, is the purpose of early detection, early registration and early education."

from a German publication

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vision in a child, active intervention at this stage can produce changes in acuity and function. It can also reduce the negative effect of lack of vision on all areas of development, and can reduce or eliminate many behavioural problems."

Sherry Raynor's energies have had a singular direction these past few years. From the earliest efforts as a volunteer, she has taken decisive steps to enlarge the scope of her concerns. She earned a Master's Degree from Michigan State in 1967; her focus was "Teaching the Visually Impaired."

The Michigan School for the Blind offered her space for a model demonstration program if she could find funds to support it. A Federal grant provided the funds.

For three years she worked to develop a center-based nursery school for children 3-5 years old and worked with babies under that age. The next four years saw development of in-service training for those who were already working with special needs programs but needed a better understanding of working with blind infants.

But laments Sherry, "Even today there are very few programs specifically for the visually impaired birth to three year old child." Only one school, Michigan State University, offers specific training for those wishing to work with the infant blind. But the need is great, and requests continue to reach her for help in this area.

From that initial experiment in Michigan, Sherry Raynor began to organize a network of people who shared her concern. Finally, in 1978, she and a group of concerned people incorporated as the International Institute for Visually Impaired 0-7.

Seven years of experience had shown that, contrary to her early assumptions that "all we had to do was to go out and look at other programs, gather materials and put ourselves out of a job, we found there were very few other programs, almost no materials, and what materials were available were not readily available." So the first goal of the Institute was to increase communication, to become a clearing house for information to other people — not only in this country but around the world.

Nobody really knows how many blind infants are born each year or the number that may still be in infancy, but Sherry estimates twenty to twenty five thousand preschool children in this country and millions around the world.

Figures from the Medical Center in Worcester indicate that out of 24,000 births in the past three years 35 children were born blind or with greatly impaired sight.

In other parts of the world, the numbers are significantly higher. In Bangladesh alone 17,500 blind infants have been identified, many others may be unknown. In some parts of India, as many as 50% of pre-school children are visually impaired.

Sherry said that there are great needs among the developing countries for nutritional changes and for measures to prevent blindness, but she sees her role as meeting the needs of children already born and to be born before preventive measures can be taken.

World-wide problem

In response to a world-wide need for sharing information and resources, Sherry and Dr. Emanuel Chigier from Israel worked together to co-sponsor the First International Symposium on Visually Handicapped Infants and Young Children: Birth to Seven. Held in Tel Aviv, Israel in June of 1981, it drew more than 300 participants from 27 countries.

A second symposium was held in tiny Aruba, an island in the Netherland Antilles in May of this year. Sherry was moved by the welcome which the symposium received — banners in the street, a public welcome. But what pleased her most was the attendance, 300 from 30 countries, and the willingness on the part of the participants to share resources.

Operating on an international level complicates the day-by-day operation of the Institute. Materials available in one country must be translated into languages available to other countries. But it seems that whenever Sherry Raynor runs into a problem, she finds a solution at hand. Recently, while shopping, she mentioned to the owner of the store that she needed some translating done. He said he spoke Italian and would be glad to translate materials in his off hours.

Although daily involved in administrative duties, Sherry Raynor is in touch with blind children, both here and abroad.

Other volunteers are working on a booklet that would provide helpful ideas for those who babysit with young blind children.

For the past three years, Sherry has worked at Perkins Institute for the Blind in Watertown. Under a Federal grant she has established a model program for working with birth to three year olds that has been very successful. However, since the Federal grant was aimed at finding out ways to do things rather than providing direct services, about a third of the families who requested help were able to receive it.

Now Sherry Raynor has left Perkins to devote full time to the Institute which she was instrumental in founding. A Federal grant to fund Project Outreach U.S.A. has been approved, and Sherry and her small staff, many of them volunteers, will work full time to provide for communication and the sharing of resources that are increasingly available because of her work.

There is a word that will not be found in the dictionary, "blindisms" — and it is a word Sherry Raynor thoroughly dislikes. Until a decade ago, it was generally believed that the "blindisms" and unusual behavior of congenitally blind persons were simply something that came with blindness and had to be accepted as such. It was often assumed that a child blind from birth would be unable to attain normal ambulation or motor patterns and would also have developmental lags in other areas.

But Sherry's work is based on the increasing evidence that with striking regularity such behaviors are not necessarily expected outcomes of early blindness. On the contrary, when exposed to extensive physical and educational intervention techniques from birth, visually handicapped children can and do often attain normal motor and behavioral patterns. She sums it up this way: "The knowledge of how a blind infant should coincide with the beginning of special care for that child's life progress."

The work that Sherry is doing has received support and commendation from many quarters, including agencies that serve the blind in various ways.

The Lions International is considering a major grant for this work. A grant has been proposed by the Lions 33-K in Massachusetts to the Lions Club International Fund. Local Lions Clubs of District 33-K receive credit for contributions they make to the Institute.

Governor Michael Dukakis, just a few days after assuming office for the second time, endorsed the grant request for Project Outreach U.S.A. A number of organizations that work with the blind have also given their endorsement.

Perhaps the greatest satisfaction for Sherry Raynor is that her daughter Bee is now a sophomore at Michigan State, majoring in music and music therapy. In another day and under less fortuitous circumstances, lacking a supportive family, and a mother who would not quit searching, she might have been one of those blind children whose development was permanently impaired by ignorance.

She is also heartened by the fact that on November 8th, the first state-wide gathering of Massachusetts parents of infant blind children will meet in Woburn, MA.

(Editor's Note: Further information about this work may be secured by writing to the International Institute for the Visually Impaired, 0-7, 14 Gay Street, Newtonville, MA 02160.)

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Saturday at Joyce Junior High

Woburn Lions sponsor statewide sight workshop

WOBURN — The Woburn Lions Club is sponsoring the first statewide workshop for parents of blind or visually impaired preschool children, on Saturday, November 5, at the Joyce Junior High School.

Saturday marks the first statewide meeting of the Early Years Education and Support group, the Massachusetts organization for parents of preschool or visually impaired children.

This day-long workshop will provide an opportunity for parents and professionals to share information, challenges, frustrations and accomplishments.

The panel of parents of visually impaired children and consultants will reach out to parents of newly diagnosed visually impaired children, provide them with a resource manual and serves as a center for information to families raising these children.

The conference will be held at the Daniel L. Joyce Junior High School in Woburn. The Woburn Lions Club has arranged a luncheon for the participants and child care will be provided by students from Boston University.

The conference will begin at 9:30 a.m. and will continue until 4:00 p.m. Information on the registration fee for individuals and families can be obtained by calling 933-5179.

Governor Michael Dukakis has proclaimed the week starting with November 5, 1983 as "International Institute for Visually Impaired, 0 to 7 Inc. Blind Baby Week." This event on Saturday launches the week off.

For further information call: International Institute for Visually Impaired 0-7 Inc., 14 Gay St., Newtonville, Ma. 02160, phone 427-0476, or Lion Phil McGann 933-5179.

I'M GONNA GROW UP TO VOTE

TOTALLY BLIND AT 3 – Katie Cuthbertson, blind at three years of age, is the daughter of Diane Cuthbertson, the parent coordinator of the Woburn Lions Club sponsored statewide workshop for parents of blird or visually impared pre school children, at the Joyce Junior High School on Saturday from 9:30 to 4:00.

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Unique institute offers help

'Blind Baby Week'

Fall River, Mass. Herald News,
Wednesday, November 9, 1983.

This is a week that has a special meaning for a Fall River couple and their daughter...as well as for an estimated 20,000 children in this country and their parents.

Proclaimed as "IIVI Blind Baby Week" by Governor Dukakis, it calls for increased public awareness of the needs of visually impaired children and of the services available for parents. It also commends and urges support of the International Institute for Visually Impaired, Birth to Seven, Inc. The institute, a Massachusetts charitable organization, is the only such group in the world devoted solely to the collection, development and dissemination of information, materials and services for infant and young blind or visually impaired children.

Julie V. Urban, daughter of Mr. and Mrs. Henry P. Urban Sr. of this city, teaches blind preschool children from infancy to school age entrance. She is also involved in, and working with, the institute, whose headquarters are at 14 Gay St. in Newtonville.

A graduate of Boston College and Perkins School for the Blind teacher training program for work with the visually handicapped, she has taught blind children in Minnesota, Arizona and Connecticut as well as her home state.

Her parents, who are volunteers in the institute's fundraising efforts, note that she has seen the results that can be obtained when appropriate service is provided to very young blind children and their parents.

They note that "The battle of Helen Keller is still being waged to help young babies as she was helped...but as a much younger age." They add in a fundraising appeal letter that "There few Annie Sullivans."

The institute is headed by Sherry Raynor, whose 20-year-old daughter, now a collge student, was born blind. Her sense of isolation during her daughter's infancy combined with her experience as a teacher of handicapped children led her to seek ways to help other parents and eventually to start the institute. She came to Massachusetts in 1979 to join the staff at Perkins and initiated their preschool program for visually impaired children and then secured a federal grant to include services at Perkins for infants and toddlers.

She is now working full time with the institute and oversees the work of volunteers.

The institute was recently awarded a one-year federal grant to fund Project Outreach USA to assist others to develop or improve services for blind and visually impaired children. The infant-toddler program Ms. Raynor developed at Perkins is the model demonstration site for the institute's outreach project which is now servicing Connecticut, Maine and Alabama. Representatives will go to other states upon request.

During the three years that they have been giving time and support to the institute, Mr. and Mrs. Urban have had a chance to learn a lot about the plight of handicapped children both here and abroad, through their daughter and the people she has encountered at the institute's conferences. The institute has sponsored two international parleys, in Israel in 1981 and in Aruba earlier this year, so that professionals can exchange information.

It is known that many of the world's babies are born blind or visually impaired. The number of affected preschool children in this country is estimated at 20,000. In less well developed countries, there are reportedly areas where as many as 50 percent of the preschool children are visually impaired because of Vitamin A deficiency

Until recently, parents of such children had few places to turn for help. But, it is believed that if information and assistance are provided early to parents and teachers of preschool blind children, the children can benefit at an age when they are developing...not only intellectually but in terms of motor and speech skills, in response to stimuli, in learning to be mobile and to play.

Now there is also an organization like the Early Years Education and Support Group (EYES), a new Massachusetts group for parents of preschool children who are ablind or visually impaired. The opening day of the weeklong observance coincided with the first statewide meeting of the group. A voluntary project, EYES was e[illegible]lished by the In[illegible] to begin to pro[illegible] much needed in[illegible]mation, resources and support to parents as soon as possible after the birth of a visually impaired child.

Further information may be obtained by contacting the International Institute for Visually Impaired, 0-7, Inc., 14 Gay St., Newtonville, 02160.

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VOLUME III DECEMBER, 1983 NUMBER 9

state of Alabama. In a November statement, Field Services Director Terry Graham reported that 168 children are currently enrolled in the Program, with 43 more having been identified and awaiting admission. An additional 33 children have been referred to the PIP.

* * *

The Alabama Institute for Deaf and Blind hosted a quarterly meeting of the Coosa Valley Unit of the National Association of Social Workers on December 7. The Unit covers a nine-county area in the eastern section of Alabama. Approximately 25 social workers and social work students from Talladega, Sylacauga, Anniston, Gadsden and Jacksonville State University attended. AIDB now employs four social workers and two social work aides.

* * *

The National Accreditation Council for Agencies Serving the Blind and Visually Handicapped (NAC) invites all interested persons to comment upon the proposed drafts of NAC's revised management standards: C-1 Policy and Administration, C-2 Accountability for Services and Finances, C-3 Staff and Volunteers, and C-4 Buildings and Grounds, during the national review period from April 1, 1984 — July 31, 1984. Copies will be

the death of Ms. Helen M. Tilley of Birmingham. Crozier will chair a committee of over 300 volunteers throughout the state of Alabama whose major objective is to create a greater acceptance of handicapped individuals into suitable employment.

* * *

Mr. Hugh Sims, Recruitment Officer, at E.H. Gentry Technical Facility, traveled to Baton Rouge, Louisiana in early December to present an outstanding program on the Institue at a Training Program sponsored by the Arkansas Rehabilitation Continuing Education Program (ARCEP). Jerry Swearingen, Director of the Division of Blind Services in the Office of Human Development for the State of Louisiana, was very enthusiastic about the quality services provided by the Institute and encouraged his staff to utilize those services as appropriate.

* * *

Shirley Hamer, Coordinator of Admissions and Assessments in the Office of Field Services at AIDB has been elected as President of the Mental Health Association of North Talladega County. Shirley came to the Institute from the mental health field as a social worker and counselor. The

BOSTON VISITORS IMPRESSED WITH INSTITUTE

THREE OUTSTANDING EDUCATORS from the campus of Perkins School for the Blind, Watertown, Massachusetts (a Boston suburb) came to Talladega recently representing the International Institute for the Visually Impaired and were eloquent in their praise of facilities and programs underway at the Alabama Institute for Deaf and Blind. Here, Sherry Raynor, left; Mary Keefe, center and Julie Urban, right are busy observing children in the ASB preschool program. They were on campus to discuss AIDB's participation in a model project for serving visually impaired infants and preschoolers.

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One woman's campaign

By Kevin C. Kennedy
and T.C. Whitehouse

Sherry Raynor has devoted two decades to special care for blind infants

NEWTONVILLE — Sherry Raynor is beginning to see the results of a campaign she embarked on more than 20 years ago. It started when her sixth child, a daughter, was born blind.

Recently, after two decades of working to increase public awareness of blindness in infants, she has opened up the International Institute for the Visually Impaired, 0-7, on Gay Street. Her goal, and the goal of the institute, is to identify blind and visually impaired infants, to make sure those children get the special care their situation merits and to help their parents develop a network of shared experiences and resources that will reduce the isolation many of them now experience.

In her own life, Raynor has seen her daughter, Bea, who was born blind, enter Michigan State University, where she is majoring in music. She has dedicated herself to making sure that other blind infants have the same world of opportunity waiting to welcome them.

She has come a long way from the confusion and frustration she felt when her daughter Bea was born. Her search for help 20 years ago yielded little in the way of resources. After completing study for a Master's Degree at Michigan State in 1967, which focused on teaching the visually impaired, she spent seven years developing a nursery school for blind infants and training teachers already involved in special needs programs.

She came to the Perkins School for the Blind to establish a model program for working with visually impaired children under the age of three and, after three years, she left to devote all her considerable energies to the institute on Gay Street.

Raynor points to the unique problems parents of blind infants face. When parents have a child with normal sight, she explains, the child tells them what to do – the baby programs the parents. But a blind baby can not do this. The uninformed, inexperienced parent thinks, "Oh, the baby is tired or sleepy, so I will lay him down," when what the child really needs is stimulation.

Unlike the sighted child, whose arms start to fly when a parent approaches the crib, the blind child stops moving in order to listen to the approaching person.

> 'If you give them enough experiences - tactually, auditorially, the way things smell, the ways things taste - they can put that together.'
> Sherry Raynor

Unless someone who has experience intervenes and helps the parent of the blind infant interpret what is happening, the early years can bring retardation rather than development.

Sherry points out that people assume that sounds have meaning for blind children, but until the child makes a connection between the sound and the substance, there is no meaning. "If you give them enough experiences - tactually, auditorially, the way things smell, the ways things taste - they can put that together."

She also points out that "anything we do develop for the blind child is good to use for any other child, because it is an enriching experience, but everything people develop for other children we have to adapt for the blind child, for, almost always, it is visual."

According to Raynor, no one really knows how many blind infants are born each year, but she estimates that the number runs as high as 20,000 to 50,000 preschool children in this country and millions around the world.

She was encouraged to continue her campaign recently when Gov. Dukakis proclaimed the first week in November as "IIVI Blind Baby Week" and urged that efforts to identify blind infants in the state be stepped up. The Lions Club has also added Raynor's institute to the list of projects to which they make donations.

Raynor's work is aimed at presenting blind children with the sort of opportunity her own daughter enjoyed. In another day, and under less fortuitous circumstances - lacking a supportive family and a mother who would not quit searching - she might have been one of those blind children whose development was permanently impaired by ignorance.

(Kevin Kennedy is News Editor of the Graphic. T.C. Whitehouse writes for Zion's Herald, a Boston-based Methodist publication)

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Institute for blind gets no fed funds

The International Institute for Visually Impaired, Birth to Seven, Inc., based in Newton, learned last week that the federal government will not fund projects for which the institute submitted proposals to meet the needs of blind infants and their families.

The institute, which received federal funds last year, conducts an outreach project that addresses the needs of blind and visually impaired children from birth through age seven.

Outreach projects were reduced from 53 to 34 and this project will not be funded. According to the institute, this leaves programs and projects in the U.S. without a central resource to assist them to develop or improve programs for the increasing number of blind infants and young children being identified and for whom there are no services specific to their disability.

Wendy Cullar, director of the U.S. Department of Education, Office of Special Education, informed the institute that 242 applications to initiate model programs for young handicapped children were received and only 30 new demonstration projects will be funded this year.

Mrs. Sherry Raynor, president and co-founder of the institute, said, "This refusal of federal assistance is a serious blow, but not fatal. Our work must go on. The institute will continue to meet the challenge at whatever level possible to increase public awareness of the special needs of blind children, their parents, and educators.

The institute works to provide parents and professionals with support and information that will help them meet the needs of the blind baby in the crucial years from birth to seven.

Raynor said that two previous programs for blind infants, in Michigan and Massachusetts, originally funded by the federal government, have become established and now operate without federal assistance.

She added that the institute has also encouraged international participation in meeting the needs of blind children in countries where the incidence is many times higher than in the U.S.

The Tab, October 9, 1984

A Helping Hand

Newton woman offers aid to parents of visually handicapped children

By Jennifer S. Costa

"Ninety percent of what an infant learns is visual," says Sherry Raynor, president and co-founder of the International Institute for Visually Impaired Infants, a Newton-based non-profit organization serving children from birth to age seven. But what of those infants born with partial vision or no vision at all? How do they learn to function in a world they cannot see?

Raynor herself was faced with that problem 21 years ago when her daughter, Beatrice, was born without eyes. Raynor searched in vain for professional guidance or even materials to assist her in properly educating her pre-school child. Not only was little information on visually impaired infants available, but few people, professionals included, were even aware of the problem.

"Unless you know of someone who is visually impaired," she says, "you don't know they exist. That's the problem."

For two decades, Raynor has dedicated herself to finding solutions to that problem. She went back to school and earned a certificate in teaching the blind at Michigan State, taught a course at San Francisco State called "Pre-School Blind Children," and published two books on the problems of visually impaired children. In 1978 she organized a volunteer agency in Michigan, gathering information on the problem from all over the world. "Parents didn't know where to turn," she explains.

Raynor came to the Perkins School for the Blind in Watertown in 1979 and developed several programs for visually impaired children. In July 1983 she was awarded a federal grant to fund her own project, the International Institute for Visually Impaired Infants. But the federal funding lasted just one year, and the institute lost its office at Perkins.

While the institute lacks the funds and facilities to provide training and services directly to infants, Raynor provides information and advice to parents on how they can help their visually impaired children develop and learn, based on her own research and experience.

Raynor and her secretary, Elizabeth Parkhurst, are convinced of the importance of their efforts, noting the problems which can arise if the children do not receive proper education and development early on. "If they don't get a chance, these children get labeled 'retarded,' when all that was medically wrong with them was blindness," Raynor says.

She recalls the problems of a three-year-old blind girl who refused to walk because she had fallen down a tiny step in her house. Her parents took her by the hand and crawled back and forth, wall to wall, to learn the floor set-up, including the step, Raynor says. Because the parents helped her understand what the step was and how it fit into her surroundings, the girl's fright was overcome and she began to walk again.

The children's attention must be focused on each aspect of their environment, Parkhurst explains. "Get their hands out and have them feel," she says.

While the loss of federal funding was a major setback, Raynor has not given up her hope of ultimately establishing a long-term center in Boston to conduct research and develop ways of helping parents with visually impaired children. "People don't realize these infants exist and are increasing in number," she says. "But in the meantime, we need to get out information to parents. But even that costs money."

There are between 300 and 500 known infants who are visually impaired in Massachusetts, according to Raynor, and services for them are "almost non-existent." Even the Boston Center for the Blind does not provide services for infants from birth to age three — the most crucial stage of development.

Raynor's institute has survived thanks to help from organizations including the United Methodist Church in Newtonville, the Somerville Distributive Education Class of America, Early Education and Support for Parents, the Massachusetts Commission for the Blind, and other groups, corporations and private donors. E.J. Colwell and Michael Lipof of the Guardian Investment Trust in Newton have donated office space for the institute at 38 Border St. in West Newton (332-4014).

Raynor hopes to raise $125,000 to $140,000 to keep up the work of the institute, which she believes is the only organization of its kind in the world. "We have to limit what we can do until we have adequate funding," she says.

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Impaired, 0-7, Inc.

Appendix - G

OFF TO A GOOD START!

A Resource Manual For Parents of Young Blind and Visually Impaired Children

OUR NEW ADDRESS:
1387 WASHINGTON STREET
WEST NEWTON, MA 02165
(617) 332-4014

The information in this directory is self reported by the agencies contacted. No endorsement is to be inferred by the parent organization, Early Years Education and Support (EYES), and we recognize there may be information that is not included. Readers are requested to recognize this as a first draft of the resource directory and asked to obtain as much additonal information from each service to assist them in decisions which deeply affect the lives of blind and visually impaired children.

The Authors
Mrs. Susan Carson
Mrs. Diana Cuthbertson
Mrs. Charlotte Forbes

For further information contact:

Early Years Education and Support (EYES)
International Institute for Visually Impaired, Birth to Seven, Inc. (IIVI)
14 Gay Street
Newtonville, MA 02160

Telephone: (617) 527-0476

FIRST DRAFT, OCTOBER 28, 1983

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INTRODUCTION

We are mothers of young visually impaired or blind children. Behind us are those very sad days when we first learned of our children's vision problems. Now, as members of the International Institute for Visually Impaired, 0-7, Inc., we have recently established a Massachusetts group for parents of young visually impaired and blind children. We call ourselves the Early Years Education and Support Group (EYES). We, as parents, have discovered through our own life experience and research that even in Massachusetts there is no comprehensive source of information about services available to visually impaired children and their families. To begin to meet this need we compiled this manual.

This Resource Manual is tailored to the needs of parents. It is to serve as a basic guide for parents of newly diagnosed blind or visually impaired children, as well as to provide a list of resources that will be useful throughout the first seven years. We have focused on four categories of concern: medical, educational, social, and recreational services.

The manual is based on self reports the individuals provided us by answering our questionnaire. An agency was included if (1) it had previously served young visually impaired children or (2) that a vision specialist works with the agency either at the site or in consultation with the site. You should place your concentration upon services where they both have served young visually impaired children and they have a vision specialist available. There is no substitute for this experience.

Over five hundred questionnaires were sent out to agencies around the state. While we have attempted to make this manual as complete as possible, there are agencies and services we have missed. In some instances we received no reply. To be most useful, the manual should be updated yearly. If you have a suggestion for a change, an addition to the services, or learn that an agency no longer serves visually impaired or blind children, please write to us at the International Institute for Visually Impaired, 0-7, Inc., 14 Gay street, Newtonville, MA 02160.

For the most part, we have not visited these agencies, therefore, we cannot recommend them from first hand experience. This is your work. Call and visit any services that you think may be of help to you and your family.

Blindness among children is on the rise. Many more families than ever before will have to come to grips with the responsibility of raising a visually impaired or blind child, yet many parents will never see another child with similar problems during the course of bringing up their families. We want you to know that you are not alone.

If you would like to talk or visit with a parent of a young visually impaired child, call us at EYES, the Massachusetts parent support group located at the International Institute's office. As part of the Institute, we gain access to resources that have been collected for many years from around the world.

Our Parent Resource Manual was developed with the aid of many people and agencies. Sherry Raynor, President of the International Institute for Visually Impaired, 0-7, Inc.,sowed the seeds of the manual when she came to Massachusetts to begin Preschool Services at Perkins School for the Blind, where we all first met. She has been an invaluable source of information and support.

Mary Keefe, former Director of Vision Resources Services of the Boston Public Schools and now also with the Institute, helped us learn about the education of blind and visually impaired preschoolers under Chapter 766.

Jennie Mohr, teacher of social service research methods at Simmons College of Social Work assisted us in grappling with technical and organizational issues in this, our first draft.

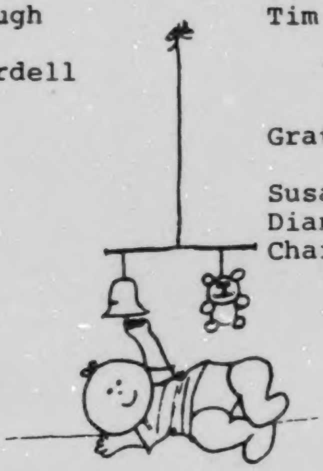
The following are other major contributors. A complete list of all those whom we owe thanks would be impossible.

Susan Becker
Debbie Farnum
Amalia Julian-Pomazon
Susan Lockett
Commissioner McHugh
Vic Mowtschan
Debbie Nelson-Gardell
Linda Norris
Ann Ross
John Stager
Susan Warshall
Tim Wilson

...and many more.

Gratefully,

Susan Carson
Diana Cuthbertson
Charlotte Forbes



MEDICAL SERVICES

All parents upon hearing the report that their child is blind or visually impaired are at first devastated. In many instances not only are the parents informed about the vision problem, but at the same time they may be confronted with other medical concerns as well. Often parents must come to understand a great deal of information about serious vision and other medical problems quickly in order to make informed decisions about the choice of treatment. You can learn what you need to know by asking questions and being assertive.

THE TEAM

Given such great stress upon the parents, it is very important that you find physicians and other helpers with whom you can talk in clear, understandable terms. You will need a whole "cast of characters" around you and your family. Among the two most important are your pediatrician and your pediatric ophthalmologist. Your pediatrician, the child's general medical physician, will watch over your child's total medical well-being. Often your pediatrician will not have previously encountered another visually impaired child in his practice and will need to work closely with your ophthalmologist.

The ophthalmologist is a doctor of medicine and is a physician licensed to practice medicine and surgery, specializing in the diagnosis and treatment of diseases and defects of the eye. It is ideal when the ophthalmolgist has even further experience with children. Thus, in a large medical setting you may be fortunate in finding a "pediatric ophthalmologist," who specializes in eye conditions in children.

Because of the many tests that will be done to follow your child, it is important that the pediatrician and ophthalmolgist can talk with one another and with you. Taking good care of your child is a team effort and all of the players have to be able to understand one another in order to provide a safe, eftective plan.

As your child grows from infancy and learns to use any remaining vision, you may be referred to a low vision clinic. There you may meet an optometrist. A Doctor of Optometry(O.D.) is a licensed, nonmedical practitioner, who measures refractive errors, such as irregularities in the shape or size of the eyeball or surface of the eye. In treatment the optometrist prescribes glasses, contact lenses and exercises for eye muscles.

The final person concerned specifically with eye care is the optician, who is the trained technician who fits eye glasses to the face according to the prescription of a licensed physician or optometrist.

The Parents - The Most Important Members of the Team

The medical team will come to depend upon the parents and expect you to become accurate observers and reporters. For example, the physician will ask what your child appears to see, if he has any residual vision. If there are medical problems, you will be asked what you notice about your child-signs of growth or the beginnings of symptoms or unusal problems.

You will gradually become an "expert" in your child's medical condition. It is very important to be as informed as possible, but you do not have to become an "amateur" physician, taking on more responsibility than is safe.

You, the parents, are the persons ultimately responsible for your child's well-being. You know your child best. Be sure you feel comfortable that you receive answers to any questions you may have. Write down your questions before you go to the appointments with your child. Do not leave until you have asked each question. Sometimes there will not be a simple answer and sometimes there may be no answer to your question, but you need to share all of your concerns with your doctor.

If your child requires hospitalization, you should know that, except in very rare situations, you may stay with your child. In fact, your presence in the hospital will be very important to your blind or visually impaired child, who will have lost all other familiar cues from the environment. You will be right there to ask your questions and talk with the many staff members who will want to know about your child.

In addition, it is often reassuring for you, as parents, to know that you are participating in overseeing your child's care.

Finally, you will be surprised with your ability to learn about a whole new world outside of your normal experience. You will learn to deal with a variety of new people and unexpected problems. Have confidence in yourself and your own common sense.

SOCIAL SERVICES

After learning that your child is visually impaired or blind, it is important to realize that there are many organizations which may make dealing with the present and planning for the future a little easier. There organizations are called social service agencies.

When other problems are also a concern, such as finances, housing, and others, the services offered by social service agencies become invaluable in helping with the practical matters so the family may concentrate on their main concern. Other services range from advocacy, respite care, parent support, counseling, and information and referral to name a few.

Advocacy services may become important as a link between written law and services which are actually delivered. Advocates can represent or assist you in obtaining benefits or services to which you or your child are legally entitled.

Respite care services provide parents of special needs children with a qualified individual who will care for their child while parents attend to other tasks.

LEGAL BLINDNESS

You may wish to consider the Massachusetts Commission for the Blind as a key agency for you. If your child is legally blind, he should be registered with the Commission. When a person's central visual acuity is 20/200 or worse in the better eye corrected with glasses or if the field of vision is very narrow, the person is considered to be legally blind. This is a very important determination your ophthalmologist must make and it is his responsibility to report his findings to the Commission. Children under fourteen years of age with poor vision, but not necessarily legally blind may also receive services. Upon being registered a child care worker will be assigned. The services of the child care worker may include home visits, referral for other services you may need, and serving as your child's advocate.

PARENT SUPPORT

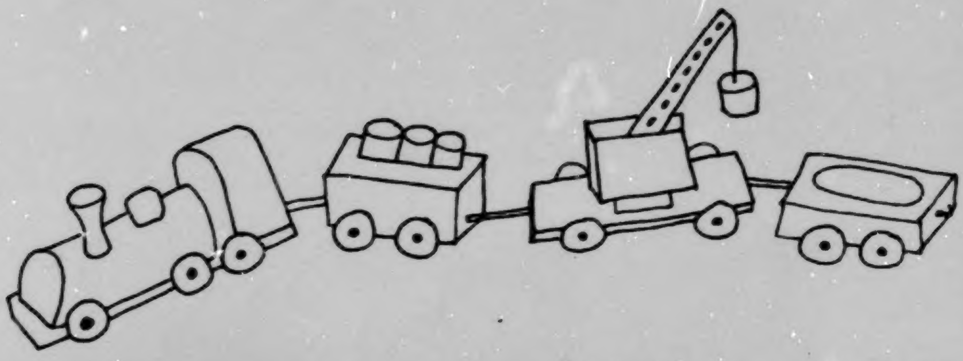
Parent support comes from many different sources. The most effective support may come from your family - your parents, brothers, sisters, and close friends. Tell them what you need help with and how they can help.

Established parent support groups are also available. Parents meeting together gives support also to the father, who may otherwise not have as many opportunities to share his concerns. Sometimes parent support groups invite speakers, who can teach about an issue, such as low vision aids. Other times a parent group might choose to make toys such as textured balls or drums for their children. Still, some of the best times are just gathering informally for dinner at family's homes for conversation, sharing, and understanding.

All families go through a grief process when they have a child with a serious vision problem. This takes time to work out. For some people this added stress seems just too much with which to cope. There is help available and we all need to seek it out at times. Trained counselors will be able to help you. They can also be of assistance with other difficulties, such as feeding problems, your child's upset around going to school for the first time, or working with developmental delays which you cannot seem to overcome alone.

You may want to call the social service department in the hospital where your child was treated to ask for counseling or referral. Local family quidance clinics are also a good resource, especially since there is usually one nearby. Your religious community often has trained pastoral counselors who can be of help, particularly if some of your concerns are spiritual in nature.

The social service agencies listed in the second half of this manual should be able to assist you in many areas. Check the description of each agency. Their sole purpose is to help you, so do not hesitate to contact them. If an agency cannot help you with a particular problem, you will usually be referred to one who will. You may never need to use some of the services offered by the agencies, but they are available and will respond if you call.



EDUCATION

Your visually impaired or blind child needs the services of an early educational program. Because an estimated 80% of learning is accomplished visually, your child has a difficult task ahead in learning what sighted children learn quite easily. An educational professional trained to work with the visually impaired can teach your child to compensate for his visual loss, and therby, help keep him from falling behind in his development. A young sighted child is eager to touch, explore and move towards the world around him. A blind or visually impaired child initially needs the world to be brought to him so that he can become aware of what is around him and be motivated to learn about it. An educational program designed with your child's needs [illegible] mind can instill in your child the desire to learn. Your child needs this extra help before reaching school age to that he is ready for placement with peers when the time comes.

THE EARLY YEARS

The educational programs available to your child vary depending on his age. If your child is less than three years old, you may elect to teach your child yourself at home with the support of a trained vision specialist, such as your Commission for the Blind child care worker.

Many parents who enjoy the support of other families may seek an early intervention program designed specifically for visually impaired children. Often these programs have two components. They may have a center-base, where you take your child and where there may be assistance from consultants such as speech and language, occupational, and physical therapists. You may also have an opportunity during your center visit to attend a parent support group. The second component of a specialized early intervention program for visually impaired children may be the home base. You will be visited at home by professionals working with you and your child.

Whether home-based, center-based or a combination of the two, an early intervention program tailored to the needs of the visually impaired child is primarily designed to help you, the parents, learn to teach your child. Your Commission for the Blind child care worker will know which programs are specifically focused upon children with vision problems.

A third possibility exists. Some children have other special needs beyond the vision problem. You may feel that you as parent may need to have more time for yourself or other family members. If either of these situations exist and you do not have an early intervention program available that specifically serves only visually impaired children, you may find an intervention program that serves all children. It is still important that the program does not lose sight of the child's vision problem. Locate a program where a vision specialist is on the staff or consults with the program. Once again your Commission child care worker may be helpful in locating the most suitable program.

It is important to know that all of the options are open to you - teaching your child yourself, attending a vision program, or attending a program where children with many different handicaps are helped. You will have to decide which option is best for your family. If you elect to attend a formal school program, you will need to make many phone calls, several visits, and ask many questions before finding the right program for you and your child.

PUBLIC EDUCATION: CHAPTER 766

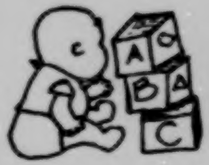
From the time your child turns three and until he reaches twenty one, he is guaranteed an adequate and appropriate public education by Massachusetts law, Chapter 766. At age three your child will be evaluated by a team of specialists who will do a medical, social, educational and psychological profile of your child. They will then meet with you to develop an Individualized Educational Plan (I.E.P.). The meeting will be held in your local school district, called an L.E.A. This plan, which is rewritten every year or sometimes more often, lists goals, objective, and skills to be mastered. It includes teaching methods, specialized services and materials and methods of evaluation. In effect, the I.E.P. should detail every aspect of your child's educational program.

You may bring anyone to the meeting to plan for your child's education who will be of help to you. Your child care worker from the Commission for the Blind can attend and assist. Also,an advocate who is familiar with the laws and procedures can be of great help and is obtained through the Federation for Children with Special Needs (617-482-2915.)

Because your signature is required on the I.E.P., you must take a very active role in insuring that your child's education is the best possible. To be familiar with Chapter 766 and your rights under it, you can obtain a copy of the law to mark and study. Send $3.85 payable to the Commonwealth of Massachusetts to the State Bookstore, Room 116, State House, Boston, MA 02113. More helpful to you may be a parent handbook on the law which is generally available from your local school district. Working actively with the professionals on the team and learning for yourself what is available to your child can take quite a bit of time and effort. Be persistent and your work will pay off in your child's education.

To begin the evaluations necessary for an I.E.P., you should contact the Special Education Director in your local school district. It is a good idea to call him or her six months before your child's third birthday so that you are familiar with the procedures in your town and so that the work can be started as soon as possible. Once you contact the local school district, they can help you choose from a variety of options depending upon your child's age and needs.

Collaboratives



Your local school district has its own special education classes and services, and often times also those of a collaborative. A collaborative is a group of school districts that have joined together to provide special education programs that they could not offer individually. If your school district is a member of a collaborative, then those services will be available to your child. Local school districts and collaboratives often hire itinerant vision teachers, who are special education teachers trained in vision who travels from one school to another. This teacher would spend a limited amount of time with your child and/or your child's teacher in helping her work with your child.

Some of the other options available to a preschooler are a Headstart program, or a day care center, nursery school or preschool that is certified for special needs. Headstart is a federally funded preschool program designed primarily for low income families, but which is also required to serve some special needs children. These may not always be recognized officially by a town for reimbursement under Chapter 766. These programs may be appropriate if a vision specialist is available.

Mainstreaming

While Chapter 766 mandates an adequate and appropriate education, it also requires that the services be provided in the least restrictive environment. This means that your child may be "mainstreamed" into a regular classroom, if possible. Special services are provided outside of or in addition to the regular classroom only if deemed necessary to insure an adequate and appropriate education. Mainstreaming will not start until your child is age five when other children begin kindergarten.

Your child may begin in a program that is substantailly separate from a regular classroom and gradually join his peers as he is able. Your child's I.E.P. should strike a good balance at allowing him to be with his peers in a regular classroom while still providing the special services he needs for a quality education.

Your initial efforts in obtaining assistance for you and your child will be just the first of many steps in the education of your child. You will want to visit programs, talk to teachers, and seek out alternative programs to find what is best for your child. Begin observing programs so early so you can make several visits and have a chance to return to ask questions and notice any changes. The task may seem overwhelming, but it can be accomplished little by little and every effort on your part will be well worth it.

As you make arrangements for your child's formal education,do not forget the important role that you play in his life as an educator. No teacher and no program can replace you. You are your child's greatest teacher, best friend, and most effective advocate. Because you know your child better than anyone else, you can contribute significantly to his education. All the simple skills you teach him at home, he will use the rest of his life All the information about him that you bring to his teachers will help them educate him. You are important in your child's education!

RECREATION

Because the role of the parent as educator is stressed so much in today's world, the activities parent and child may do just for fun are sometimes overlooked. This is especially true in the case of a blind or visually impaired child. There are always areas in development in which your child will be behind. Once one goal is reached, it is time for the next. It is important, however, not to forget to take the time for doing some thing for the pure enjoyment of doing it!

Almost any activity can be adapted in some way so your may participate. Use your ingenuity. These activities may be less structured than those you undertake as parent "educator", but they also serve their purpose. Your child will become a more confident, more social child.

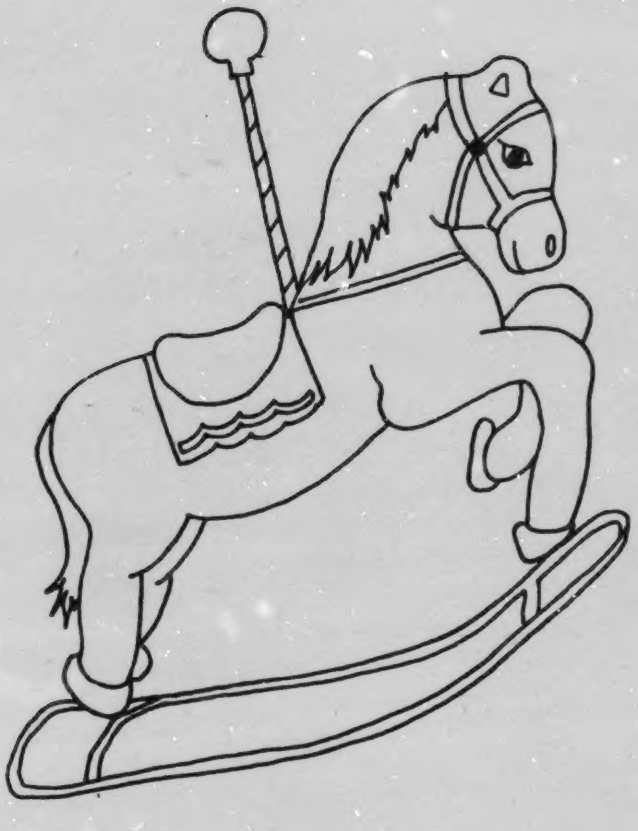
There will be times when you want to place your child in a more formal program of recreation. The experience of being with other children is important for any child. It is invaluable to a blind or visually impaired child. In many cases, it will also be the first time your child may be in the care of another adult or be mainstreamed with other children.

Do not be discouraged if your child does not seem to fit into the mainstream right away. It may even be necessary for your child to have private lessons at first. Just persevere. Remember, we are all unsure of ourselves when trying something new. This is not a unique problem to a blind or visually impaired child.

Listed in the second half of the manual are recreational opportunities in Massachusetts, including some outside the state which are particularly noteworthy. We would like to stress that there are, no doubt, many others available. We have included examples only of some town and city recreation programs. We suggest calling your local recreation department listed in the yellow pages of your phone book for programs in your area. You may find a source by calling the local YMCA,YWCA, Boys' and Girls' Clubs.

Some recreational organizations have programs specifically designed for special needs children; others will mainstream your child. A few examples of these programs are listed. If you think your child would enjoy a particular activity, consult the yellow pages and call the facility offering it. You may find the instructors willing to offer the opportunity to learn to your child.

DIRECTORY OF SERVICES AVAILABLE IN MASSACHUSETTS

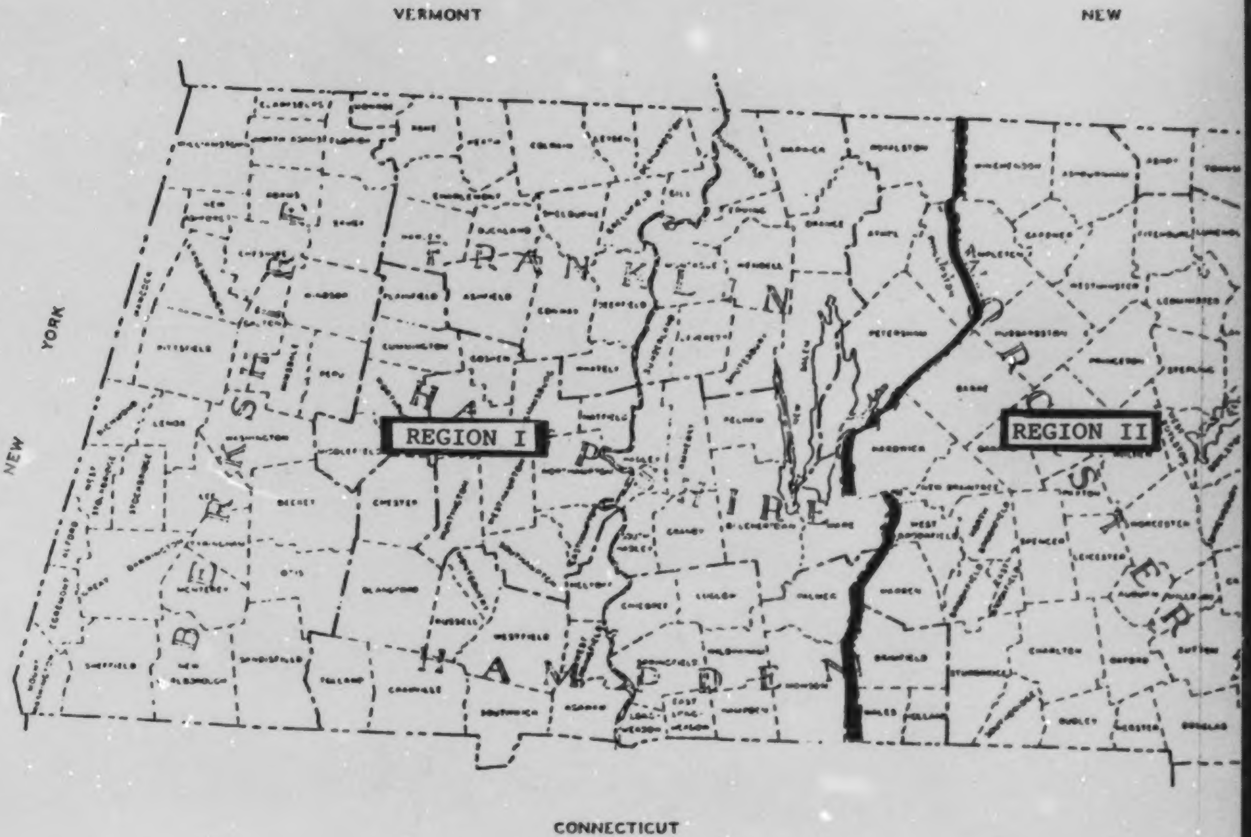


HOW TO USE THE DIRECTORY

As most of you will be looking for services located nearby- within a reasonable driving distance, we have used the Massachusetts Commission for the Blind geographic areas as our framework. First, locate the region in which you live on the map that follows. Then go to the section in the directory which describes services in your area.

You may also want to scan your neighboring region to see if there are services which may better meet your needs, even though they may be at a greater distance. Some agencies serve the entire state. They are listed following the regional listings. These are very important services which you should definitely read.

An index of services at the beginning of each section may also be helpful in locating a specific service you may require. Finally, you will notice on the top left hand corner of each description of each agency a group of boxes. The primary service(s) is represented by coloring in the entire box. Other services which the agency performs have a diagonal line drawn and are half way filled in.


VERMONT
NEW
NEW YORK
BERKSHIRE
FRANKLIN
HAMPSHIRE
HAMPDEN
WORCESTER
REGION I
REGION II
CONNECTICUT
RHO

THE COMMONWEALTH OF MASSACHUSETTS

DEPARTMENT OF COMMERCE AND DEVELOPMENT

DIVISION OF PLANNING

CITIES, TOWNS AND COUNTIES

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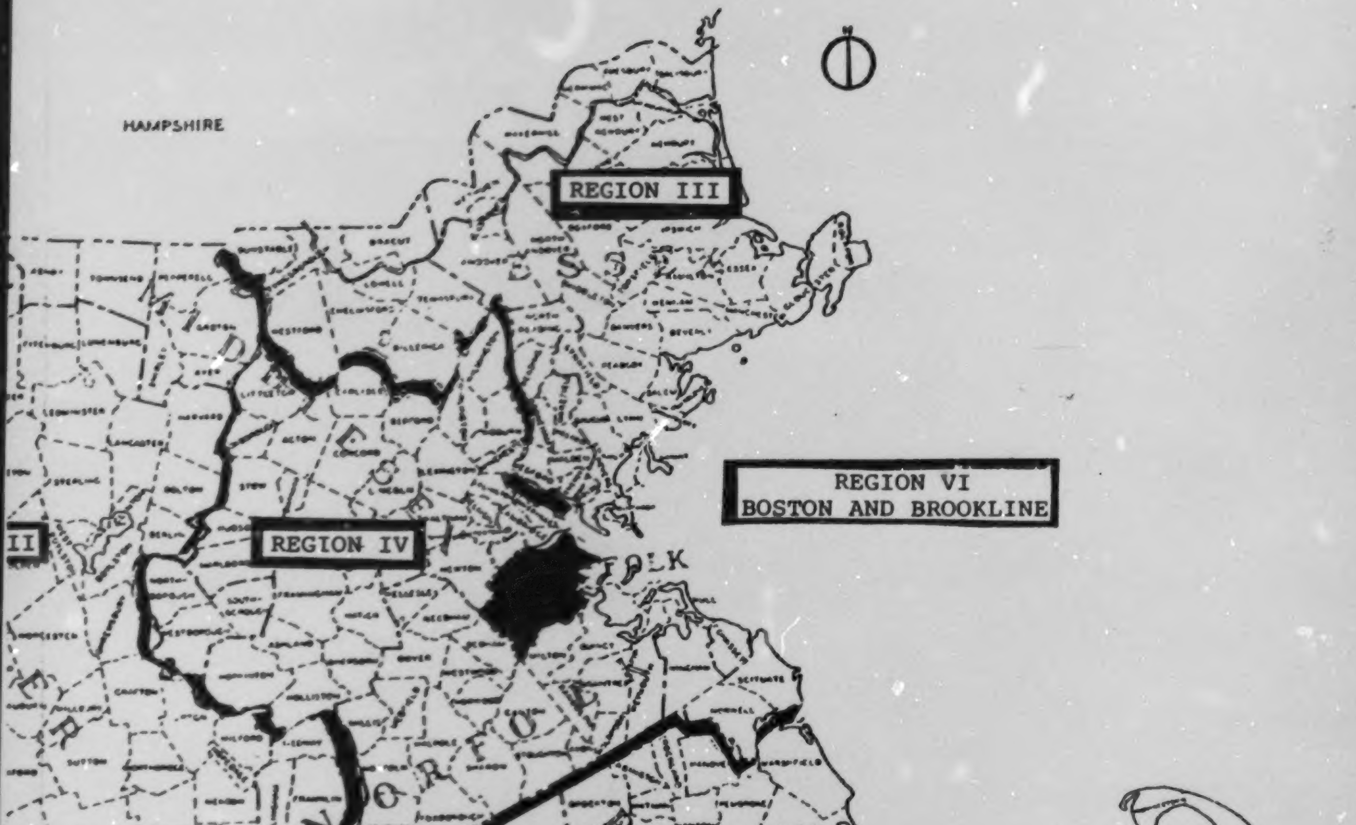
HAMPSHIRE
REGION III
ESSEX
MIDDLESEX
REGION IV
II
REGION VI
BOSTON AND BROOKLINE
NORFOLK
PLYMOUTH
BRISTOL
REGION V
BARNSTABLE
RHODE ISLAND

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REGION I

Agency	Services offered by Agency	Page
The Children's House N. Florence	Education	14
Developmental Disabilities Law Center, Springfield	Social	15
Early Idendification Program N. Adams	Education, Social	16
Early Childhood Service Team (DPH) Springfield	Education, Social	17
Hampshire Regional YMCA Northampton	Recreation	18
Massachusetts Association for the Blind, Springfield	Social	19
Reach Program Northampton	Education, Social	20
Springfield Parks and Recreation, Springfield	Recreation	21
Vision Rehabilitation Center, Springfield	Medical, Social	22

THE CHILDREN'S HOUSE

321 Locust Street
N. Florence, MA 01060
(413) 586-4538
Serves N.E. Hatfield, Haydenville, Williamsburg
Contact Sylvia B. Kriebel

Services Provided:

- Medical ☐
- Social ☐
- Educational ☒
- Recreational ☐

Age Range: 2 years 9 months - 5 years.

Types of Children Served: All Children

Eligibility Requirements: None

Description of program: This is a Montessori School, the Childrens House offers a morning class and an afternoon class 5 days a week to children from 2½ to 5 years of age. As a Montessori School, the general philosophy is that children are eager and able to learn at a young age and that children progress at their own rate. The children are free to choose their own activities and may work alone, in a group or with a teacher. The school is 766 approved.

Staff Composition: Director and Assistant.

Previous service to visually impaired or blind children: Yes, 4 years.

Vision Specialist: No

Cost: Tuition is paid monthly or in 3 installments. There is a $50 deposit required on registration. Some scholarship funds are available.

Transportation: Not provided.

Duration of Program: School year.

Referral Process: Parents may call for information.

DEVELOPMENTAL DISABILITIES LAW CENTER*

Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

145 State Street, 6th Floor
Springfield, MA 01103
(413) 781-7814 (voice and TTY)
Serves all towns in Hampden, Hampshire, Franklin and Berkshire Counties
Contact: Carol Booth, Staff Attorney

Age Range: All ages

Types of Children Served: Any person with a developmental disability.

Eligibility Requirements: Any developmentally disabled person who cannot afford private counsel.

Description of program: We provide legal assistance, information and representation to developmentally disabled people on issues relating to their disability. (i.e. special education, SSI, discrimination).

Staff Composition: 2 Part-time attorneys (each works 3 days per week).

Previous service to visually impaired or blind children: Yes.

Vision Specialist: No

Cost: Services are provided free of cost. If you can afford a private lawyer, DDLC will assist you in finding one.

Transportation: N/A

Duration of Program: 9-5, M-F

Referral Process: Self-referral, through state agencies, through schools, through parents.

* This office is a branch office of the DDLC at 284 Washington Street, Boston, MA

EARLY IDENTIFICATION PROGRAM

85 Main Street Suite 628
N. Adams, MA 02147
(413) 664-4541
Serves Adams, N. Adams,
Williamstown, Clarksburg,

Contact: Maureen Smith Jette
Administrative Director

Services
Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

Age Range: Birth-three

Types of Children Served: Children at risk for developmental delay, Children identified with developmental delays.

Eligibility Requirements: None

Description of program: We provide a wide range of screening, identification and treatment services to children and their parents. Services include community playgroups, developmental screening & assessments;home visits, developmental playgroup, consultation with developmental specialists, parent information line;and parent support groups. Staff work in close partnership with parents and other service providers.

Staff Composition: Developmental teachers, 1 M.S.W., 1 Occupational Therapist, 1 Speech Therapist, 1 Psychologist, 1 Administrative Director, and 1 Program Secretary.

Previous service to visually impaired or blind children: Yes, 7 months

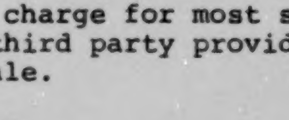
Vision Specialist: Yes, Consultant.

Cost: There is no charge for most services. Assessments are billed to third party providers or offered on a sliding fee scale.

Transportation: Yes

Duration of Program: Groups offered daily/home visits daily.

Referral Process: Clients can call our office or be referred by physician, visiting nurse, social worker or other provider.



EARLY CHILDHOOD SERVICE TEAM-D.P.H.

78 Maple Street
Springfield, MA 01105
(413) 732-4062
Serves Springfield, Wilbraham, Longmeadow, E. Longmeadow, Hampden.
Contact: Rose McConnell

Services Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

Age Range: birth- 3 years.

Types of Children Served: Children at risk for development.

Description of program: The Early Childhood Service Team believes that while families are the primary educators of their children, families with special children often need help. They offer help through a variety of programs including therapeutic, support and educational services. The educational services include home teaching, baby groups, toddler classes, parent groups and summer programs. among the support services are relief play groups and respite care. To arrange an initial visit, stop by or call the office.

Staff Composition: Coordinator, Early Childhood Educators, Nurses, Social Workers, Psyshologist, Speech Therapist.

Previous service to visually impaired or blind children: Yes, birth - 3 years.

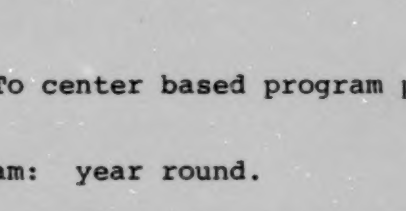
Vision Specialist: Consultant from Mass. Comm. for the Blind.

Cost: None

Transportation: To center based program provided by Mass. Dept. of Education.

Duration of Program: year round.

Referral Process: Intakes taken by phone.



HAMPSHIRE REGIONAL YMCA

286 Prospect Street
Northampton, MA
(413) 584-7086
Serves Hampshire County
Contact: Suzanne Walker
Sr. Program Director

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

Age Range: 3 months to Senior Citizens.

Types of Children Served: All - regardless of disability, race, color, creed, we are nondiscriminatory.

Eligibility Requiremnts: Depends on program - for most programs none.

Description of Program: Extensive movement and water skills programs for young children. Nursery School and toddler play groups, also a summer camp program designed especially for children 3-5 years of age including movement education, song time, outdoor hikes, daily swim lessons and crafts.

Staff Composition: Executive Director, Sr. Program Director, Aquatics, Physical and Preschool Directors. Additional part time staff.

Previous service to visually impaired or blind children: Yes, 3 to 10 years.

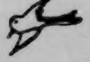
Vision Specialist: No response.

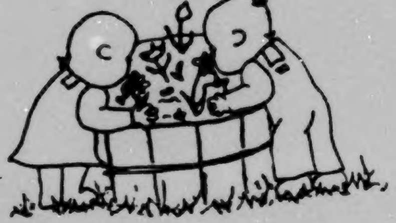
Costs: Depends on program.

Transportation: No response.

Duration of Program: 4 or 8 week sessions.

Referral Process: Call YMCA.





MASS. ASSOC FOR THE BLIND

3 Locust Street
Springfield, MA 01108
(413) 734-7343
Serves Greater Springfield, Holyoke,
S. Hadley, Pioneer Valley
Contact: Joan Walker, Coodinator

Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: Any persons with visual impairment

Types of Children Served: Visually impaired school age and up referral services to families of younger children.

Elgilibility Requirements: None

Description of program: Social work evaluation, information and referral, volunteer program, aids and appliances inventory and public information. We are also affiliated with the Vision Rehabilitation Center at Mercy Hospital, Springfield, MA.

Staff Composition: Social Worker, Volunteer Supervisor, Secretary

Previous service to visually impaired or blind children: Yes, varied.

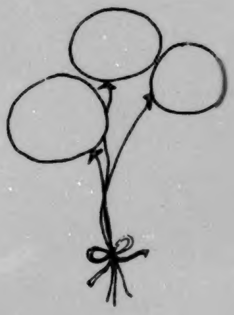
Vision Specialist: No

Cost: No fees-United Way supported.

Transporation: Volunteers provide transportation.

Duration of Program: Year round

Referral Process: Social services agencies, physicians, schools, family members, friends.



REACH PROGRAM

Services Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

56 Vernon Street
Children's Center
Northampton, MA
(413) 586-8692
Serves Franklin/ Hampshire Areas
Contact: Evelyn Boykan

Age Range: 0-3

Types of Children Served: Children with delayed development handicapping conditions.

Elgilibility Requirements: None.

Description of program: Theraputic educational and supportive program for families who have children under 3 with developmental delay or handicapping conditions.

Staff Composition: Educators, Speech & Language Pathologist, Physical Therapist, Occupational Therapist, Family Child Specialist, Nurse.

Previous service to visually impaired or blind children: Yes, all ages.

Vision Specialist: No, although we do coordinate with Mass Commission for Blind.

Cost: No

Transportation: None

Duration of Program: year round.

Referral Process: any one can refer with permission of parents.

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

SPRINGFIELD PARKS DEPARTMENT

Forest Park
Springfield, MA
(413) 787-6434 or 6435
Serves Springfield, Longmeadow,
Wilbraham, Chicopee
Contact: Tony Restiuo

Age Range: 3 and up

Types of Children Served: Persons with any physical or mental inpairment.

Eligibility Requirements: None

Description of your Program: Saturday day camp for children with disabilities. Activities include arts and crafts, sports, cooking, etc.

Staff Composition: Mostly College Students.

Previous service to visually impaired or blind children: Yes, 7 to 17

Vision Specialist: No

Cost: None

Transportation: provided

Duration of Program: November- May and July-August

Referral Process: Call ,we'll send application.

VISION REHABILITATION CENTER

Services
Provided:

Medical ■
Social ■
Educational ☐
Recreational ☐

Mercy Hospital
P.O. Box 9012
Springfield, MA 01101
(413) 781-9100 x5450
Serves primarily Western MA.
Contact: Joan Walker
Coordinator -
Social Worker

Age Range: 6 years and older.

Types of Children Served: Persons with Visual acuities from 20/50 to counting fingers.

Eligibility Requirements: No response.

Description of Program: The goal of the Vision Rehabilitation Center is to help the visually handicapped make full use of their vision capabilities. The staff provides optic devices and teaches patients the most advanced techniques in their application and use.

Staff Composition: Ophthalmologist, Optometrists and Social Worker.

Previous service to visually impaired or blind children: Yes, 6 and older.

Vision Specialist: No Response.

Cost: $49,00 initial visit, $28.00 follow-up visits. Charge for any aids the individual needs. Assistance is provided in obtaining third party payment as indicated.

Transportation: If located in the Greater Springfield, Holyoke area, volunteer transportation from the Mass. Assoc. for Blind.

Duration of Program: Depends on individual patient. Usually at least 2 visits.

Referral Process: Physicians, social service agencies, optometrists, public school systems, families and agencies serving the visually handicapped. Recent eye report is needed.

REGION II

Agency	Services offered by Agency	Page
Blackstone Valley Educational Collaborative, Upton	Educational	24
Fitchburg Center for Brain Injured Children, Fitchburg	Educational, Social	25
H. Lipton Community Mental Health Center Developmental Services, Fitchburg	Educational, Social	26
Massachusetts Association for the Blind, Worcester	Social	27
Respite Care Program Worcester Area Association for Retarded Children, Worcester	Social	28
Services for Visually-Impaired Infants and Toddlers, Worcester	Medical, Education, Social	29
South Central Early Intervention, Southbridge	Educational, Social	30

BLACKSTONE VALLEY EDUCATIONAL COLLABORATIVE

P.O. Box 441
Upton, MA 01568
(617) 529-3028
Serves Milford, Millbury, Upton, Mendon, Grafton, Northbridge, Uxbridge, Bellingham, Blackstone, Sutton.
Contact: Dr. R. Budde

Services
Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

Age Range: 3 - 21.

Types of Children Served: Visually Impaired.

Eligibility Requirements: No Response.

Description of Program: Services available in accordance with 766.

Staff Composition: Teacher Consultants for Visually Impaired.

Previous service to visually impaired or blind children: Yes.

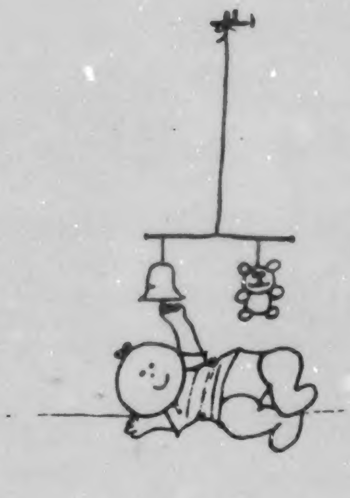
Vision Specialist: Teacher - Consultant.

Cost: No response.

Transportation: No response.

Duration of Program: No response

Referral Process: Through 766.



Services
Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

FITCHBURG CENTER FOR BRAIN INJURED CHILDREN, INC.

159 Richardson Road
Fitchburg, MA
(617) 345-0159 or 345-0340
Serves 65 mile radius or more in
Montachusetts area.
Contact: Viola Dufour or
Gustav Stewart, III

Age Range: 3 - 21 under Dept. of Education
0 - 16 under Office for Children License.

Types of Children Served: Severe/profound multihandicapped usually.

Eligibility Requirements: Children enrolled do not have to have any special abilities.

Description of Program: The Fitchburg Center for Brain Injured Children offers a year round day program for multihandicapped children who have suffered a serious neurological insult. The students are primarily pre-school age with significant motor and/or sensory delays. Many of the children are blind or visually impaired. The Center is a 766 State Approved Private School.

Staff Composition: 1 on 1 at all times, often 5 adults on 1 child at one time.

Previous service to visually impaired or blind children: All our students are visually impaired. We have served deaf/blind also.

Vision Specialist: Yes.

Cost: As promulgated by the Rate Setting Commission. Presently, $12,817 annually.

Transportation: As contracted with local L.E.A.s.

Duration of Program: 50 week year - 5 day week, 6 hours per day.

Referral Process: Via parents, schools, D.M.H., D.P.H., or physicians.

H. LIPTON COMMUNITY MHC-DEVELOPMENTAL SERVICES

545 Westminister Street
Fitchburg, MA 01420
(617) 343-6957
Serves Ashby, Ayre (including Fort Devins), Berlin, Bolton, Clinton, Fitchburg, Groton, Harvard, Lancaster, Leominster, Lunnenberg, Shirley
Contact: Ms. Harri Thibeault RN MS
Coordinator

Services Provided:

- Medical ☐
- Social ☒
- Educational ☒
- Recreational ☐

Age Range: Birth to 3 years

Types of Children Served: At risk for or experiencing developmental delays.

Eligibility Requirements: Live or work in catchment area; under 3 years of age.

Description of program: The Early Intervention Program serves children at risk and their families. Initially services are provided at home and later as part of a center-based program. Some children may receive home and classroom services and support, the team is also involved in casefinding.

Staff Composition: Early Childhood Educator, Child & Maternal Health Specialist, Social Worker, Clinical Psychologist, P.T., O.T., Speech Terapist, 2 Child Psychiatrists.

Previous service to visually impaired or blind children: Yes, under three years.

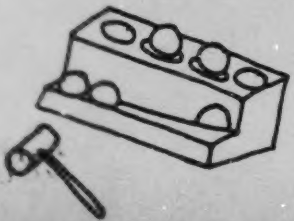
Vision Specialist: No

Cost: 3rd party payment sought - fee for service if able.

Transportation: D.O.E. transportations can be arranged if necessary (centerbase program only).

Duration of Program: from entry until 3 years or is developmentally or target for age.

Referral Process: Telephone contact by parent or agency, etc.



MASS ASSOCIATION FOR THE BLIND

51 Harvard Street
Worcester, MA 01609
(617) 791-8237
Serves Worcester County - all
Contact: Lois S. Feldman,
Regional Director

Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: young adult up.

Types of Children Served: Presently serve one infant, one 10-year old blind student and one 15 year old, both in public school.

Eligibility Requirements: None

Description of program: Information & Referral, Advocacy, Public Education on Blindness, Volunteer Services, Aids Store, Telephone Info, Group Activities (Leisure Time - eg: softball, bowling trips, etc.).

Staff Composition: 1 Intake & Referral worker, 2 Volunteer Department, 2 Community Affairs (P/R etc), 1 Regional Director, 1 Secretary.

Previous service to visually impaired or blind children: See above.

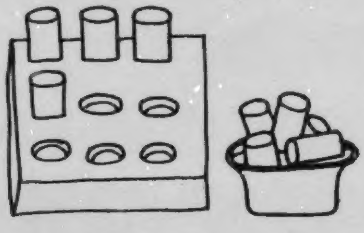
Vision Specialist: No

Cost: None.

Transportation: See Memorial Homes for Blind re: their grant.

Duration of Program: Year round.

Referral Process: Family may call directly. This is primarily an information and referral source for families with children of preschool age. Leisure time activities are designed for older populations.



RESPITE CARE PROGRAM WORCESTER AREA ASSOCIATION FOR RETARDED CHILDREN, INC.

50 Franklin Street
Worcester, MA 01608
(617) 755-2802
Serves All Towns of Region II
Contact: Irene C. Shea

Services
Provided:

Medical ☐
Social ☒
Educational ☐
Recreational ☐

Age Range: 0 - 60

Types of Children Served: Persons with developmental disabilities including the visually impaired.

Eligibility Requirements: At time of first home visit, the WAARC Area Liaison Representative determines eligibility for service based on Program criteria.

Description of Program: Provide short term care and assistance for disabled children and adults up to 20 hours per month, so that responsibilities and social committments outside the home can be filled.

Staff Compositon: Chart of Agency services enclosed includes trained respite worker and liaison staff.

Previous service to visually impaired or blind children: Yes.

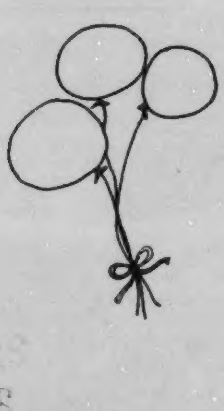
Vision Specialist: Yes.

Cost: Determined by income and involves sliding fee scale.

Transportation: Worker will come to home.

Duration of Program: No response.

Referral Process: Parent or Social Service Agency



SERVICES FOR VISUALLY IMPAIRED INFANTS & TODDLERS

U Mass Medical Center-Child Dev. Serv.
Worcester, MA
(617) 856-4202
Serves Central Massachusetts
Contact: Bonnie Blair

Services Provided:

Medical ■
Social ■
Educational ■
Recreational ☐

Age Range: Birth to three years.

Types of Children Served: Those with visual impairments not inclusively legally blind.

Eligibility Requirements: Program consultanting - Central Mass based diagnositic services to anyone.

Description of program: Consultation, referral, staff training to service providers of birth to 3 years of age and/or parents of children. Children are participants of EI program. Clinic/diagnostic service available for developmental evaluation, program evaluation. Technical assistance and info.

Staff Composition: project coordinator, full-time consulting pediatrician and educators

Previous service to visually impaired or blind children: Yes, birth to 3 years.

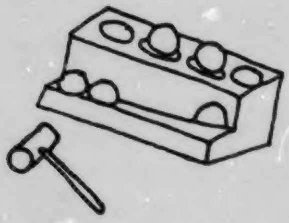
Vision Specialist: No

Cost: No fee.

Transportation: can be arranged

Duration of Program: N/A

Referral Process: Telephone only.



Services Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

SOUTH CENTRAL EARLY INTERVENTION

Harrington Hospital
100 South Street
Southbridge, MA 01550 (617) 765-9771 X488
Serves Brimfield, Brookfield,
E. Brookfield, W. Brookfield,
Charlton, Dudley, Holland,
Oxford, Southbridge, Spencer,
Sturbridge, Wales, Warren, Webster
Contact: Jimmilee Prouty

Age Range: Birth to 3 years

Types of Children Served: Delays in motor, cognitive, social, self-help, speech and language development, or at-risk for delay children.

Eligibility Requirements: The team at Harrington Memorial Hospital's Early Intervention Program believes that parents are the primary educators of their children, and that the most important period in development is from birth to 3 years. The goal of the program is to assist children in reaching the upper limits of their potential. Among the services are screenings and assessments, a parent group for education and support. A multi-disciplinary team provides physical therapy, occupational therapy, speech therapy, early childhood education services. The program combines individual with group therapy experiences and center-based programing with home visiting.

Staff Composition: P.T., O.T., Speech Pathology, Educator, Social Worker, Child Psychologist.

Previous service to visually impaired or blind children: Yes, between ages of birth and 3.

Vision Specialist: Consultant.

Cost: No response

Transportation: No response

Duration of Program: Not applicable

Referral Process: Parents may call for information.

REGION III

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Project BEAM, Billerica	Educational	36
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Visiting Nurse Association Middlesex East Early Intervention Program, Stoneham	Educational, Social	38
Windrush Farm Therapeutic Equitation, Boxford	Recreational	39

GREATER LAWRENCE EARLY INTERVENTION PROGRAM

Services Provided:

Medical ☐
Social ☑
Educational ■
Recreational ☐

33 Central Street
Andover, MA
(617) 475-7126
Serves Andover, N. Andover, Methuen, Lawrence
Contact: Sandra Levine
Program Coordinator LICSW

Age Range: Birth-3

Types of Children Served: Children with delay or at risk for delay.

Eligibility Requirements: Children under 3 who live in Andover, N. Andover, Lawrence or Methuen.

Description of program: This early intervention program is for children at risk for or exhibiting a developmental delay due to a physical, intellectual or emotional handicap. Educational and supportive services are provided for children and their families. An individual service plan for each child is prepared and regularly re-evaluated. While a day program is provided, a major emphasis for the infants is the home-base component.

Staff Composition: Teacher, Assistant Teacher, Social Workers, Psychologists, P.T., O.T., Nutritionist, Nurse, Speech Pathologist. (attempting to hire a bi-lingual aide).

Previous service to visually impaired or blind children: Yes, infants - 3 years old.

Vision Specialist: No response

Cost: None for eligible clients.

Transportation: Can be provided.

Duration of Program: Weekly through school year and one month in the summer.

Referral Process: Anyone can refer.

HEAD START

167 Dutton Street
Lowell, MA
(617) 459-0551 X183
Serves Billerica, Chelmsford,
Lowell, Tewksbury, Westford
Contact: Sharon M. Ahern

Services Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Age Range: 3-4 years

Types of Children Served: Low income, including special needs children.

Eligibility Requirements: toilet training.

Description of program: Preschool program which initially focuses on socialization then on learning new skills through individualized programs preparing for kindergarten. Field trips are an important part of the program families are involved through home visits. Parents also come to the center once per month.

Staff Composition: Director, Health Coordinator, Social Services Coordinator, Educational Coordinator, Mental Health Consultant, Special Needs Consultant, and Teaching Staff.

Previous service to visually impaired or blind children: Yes, 3-4 year olds.

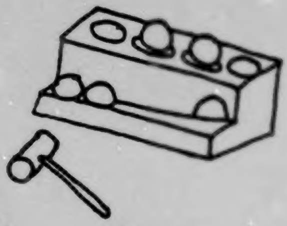
Vision Specialist: Special Needs Consultant

Cost: None

Transportation: Yes, usually.

Duration of Program: Regular school calander year.

Referral Process: Parents may call themselves and obtain an application.



NORTH SHORE CHILDREN'S LAW PROJECT

P.O. Box 710
31 Exchange Street
Lynn, MA 01902
(617) 581-1977
Serves Primarily North Shore
Contact: Sara Mackiernan,
Attorney

Services Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: All

Eligibility Requirements: None

Description of program: Represents young people in a wide variety of legal and administrative proceedings, including school matters and cases of severely handicapped children who are denied services due to bureaucratic red tape, as well as child abuse and neglect, runaways, custody and adoption disputes.
Provides consultation and technical assistance to parents, attorneys, child advocates, concerned citizens and human service providers.
Training programs on legal issues affecting children available to service providers, state agency personnel, schools and community groups.

Staff Composition: 2 Attorneys, Legal Interns and Advocates.

Previous service to visually impaired or blind children: Yes

Vision Specialist: N/A

Cost: Stipend if able to pay, otherwise free.

Transportation: No

Duration of Program: N/A

Referral Process: Any individual or organization.

NORTH SHORE EDUCATION CENTER, INC.

219 North Street
N. Reading, MA 01864
(617) 664-3344
Serves N.E. Massachusetts
Contact: Steven Carzasty

Services Provided:

Medical ☐
Social ☐
Educational ☒
Recreational ☒

Age Range: 0-Elders

Types of Children Served: SPED, Mainstreamed, etc.

Eligibility Requirements: None

Description of program: NSEC operates a store front several days a week offering dozens of items useful in making learning games. Provide education materials (recycled goods from industry) and workshops and inservice to primary providers (Teachers/Rec. Directors/etc.)

Staff Composition: Director/ Volunteers.

Previous service to visually impaired or blind children: Yes.

Vision Specialist: No

Cost: Low Cost

Transportation: No

Duration of Program: Short 1-4 session workshops

Referral Process: Call

PROJECT BEAM (Billerica Early Assistance Model)

Services Provided:

Medical ☐
Social ☐
Educational ☒
Recreational ☐

BMHS River Street
Billerica, MA 01821
(617) 667-8300 X253
Serves Billerica
Contact: Jean Coppinger

Age Range: 0-3 years

Types of Children Served: Any child who displays a handicap (physical, emotional, developmental)

Eligibility Requirements: None

Description of program: BEAM hopes to reach the special needs child early to alleviate or eliminate any problems and difficulties before he reaches school age. The center based program offers an individualized program in the classroom for each child. Activities are also planned for parents during this time. Weekly home visits are a time to work on activities determined by previously set goals. An evening parent group is held about once a month.

Staff Composition: 1 Early Childhood/Learning Disabilities Specialist, 1 Registered Nurse with teacher certification in early childhood, 2 Assistants trained under the original federal grant.

Previous service to visually impaired or blind children: Yes, two year olds

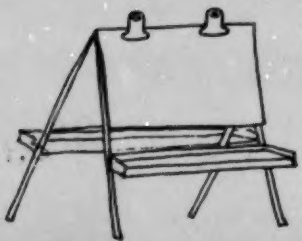
Vision Specialist: Consultant available

Cost: None

Transportation: None

Duration of Program: School year; home visits or phone contacts during summer if necessary.

Referral Process: Referrals are taken from parents, pediatricians, hospitals and teachers.



Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

TRI-CITY OFFICE FOR CHILDREN

132 School Street
Everett, MA
(617) 389-5075
Serves Everett, Malden, Medford
Contact: Dan Moriarity, Advocate

Age Range: 0-22

Types of Children Served: All children-families.

Eligibility Requirements: None

Description of program: Information and referral, follow-up, individual advocacy.

Staff Composition: Advocate/Coordinator, Community representative, Secretary.

Previous service to visually impaired or blind children: Yes, All ages.

Vision Specialist: No

Cost: No cost.

Transportation: Not provided.

Duration of Program: Not applicable.

Referral Process: Parents may call.

VISITING NURSE ASSOCIATION MIDDLESEX EAST EARLY INTERVENTION PROGRAM

Services Provided:

Medical ☐
Social ☑
Educational ■
Recreational ☐

East School
Beacon Street
Stoneham, MA 02180
(617) 438-3771
Serves Melrose, Stoneham, N. Reading, Reading, Wakefield, Woburn, Wilmington
Contact: Karen Welford

Age Range: 0-3 years

Types of Children Served: Developmentally Delayed

Eligibility Requirements: None

Description of program: The Visiting Nurse Association offers an early intervention program to provide evaluation therapy and support. The components of the program are home visits, a developmental nursery school program, center-based mother/child groups and parents' evening meeting. A child is eligible for the program who has a diagnosed disability, an undiagnosed developmental delay or who is at risk for developmental delay.

Staff Composition: Nurse Coordinator, Occupational Therapist, Social Workers, Physical Therapist, Early Childhood Educator, Speech Pathologist, Mental Health Consultant Teacher and Nutrition Consultant.

Previous service to visually impaired or blind children: Yes, 18 months - 3 years.

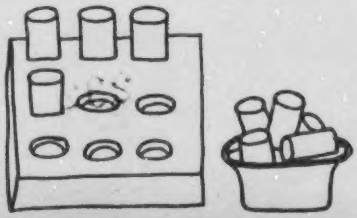
Vision Specialist: No

Cost: None

Transportation: available if needed.

Duration of Program: year round.

Referral Process: Parents, Medical Personnel.



WINDRUSH FARM THERAPEUTIC EQUITATION, INC.

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ☒

Brookview Road
Boxford, MA 01921
(617) 683-1247
Serves: Boston, Brookline, Cambridge, Hingham, Essex County, North Shore from Marblehead to Shrewsbury
Contact: Marjorie V. Kittredge

Age Range: 4 years to 62 years

Types of Children Served: Learning disabled, emotionally disturbed and a wide range of physical handicaps.

Eligibility Requirements: Must weigh less than 190 lbs all merits are judged on an individual basis - mental and physical ability that can be helped by our service.

Description of program: Therapeutic horseback riding instruction.

Staff Composition: 1 Director, 2 Instructors, 45 Volunteers.

Previous service to visually impaired or blind children: Yes, 4-6 years, 12-15 years, Adult.

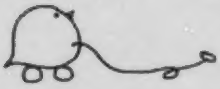
Vision Specialist: Certified therapeutic riding instruction (1 national certified, 1 cheff certified).

Cost: No Cost.

Transportation: Not Provided.

Duration of Program: Year round, except August.

Referral Process:



REGION IV

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ARLINGTON RECREATION

422 Summer Street
Arlington, MA 02174
(617) 643-6700 X321
Serves Arlington, Lexington, Burlington
others
Contact: Kathy Binney

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

Age Range: 3 and up

Types of Children Served: All.

Eligibility Requirements: None, other than an appropriate program offering.

Description of your program: offers pre-school activity program, skating and gymnastics program for young children. Although not a special needs programs, may be appropriate for your child. Also have specific special needs programs for some age groups.

Staff Composition: varies, ratio 4:1 to 1:1

Previous service to visually impaired or blind children:
Yes, elmentary school age.

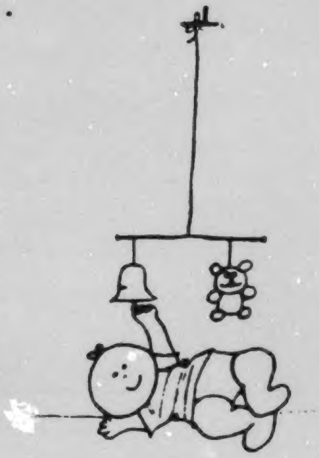
Vision Specialist: No

Cost: Fees vary depending on program.

Transportation: No

Duration of Program: Offered year round.

Referral Process: Call office.



BAYLIES BEGINNING CENTER

3 Randolph Street
Canton, MA 02021
(617) 828-2440 x319
Serves towns within 1 hr. drive of school.
Contact: Pamela Parsons
Program Director

Services Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

Age Range: 3-6 years.

Types of Children Served: Children with and without special needs - specific special needs include: Physical disabilities, perceptual motor problems, language impairments.

Eligibility Requirements: Ability to benefit from and participate in integrated program with non-special needs peers of same chronological age - children do not have substantial cognitive delays.

Description of Program: Integrated pre-school for 3-6 year olds. Maximum enrollment - 20 children (13 special needs, 7 non-special needs). Program integrates therapies into classroom program, and takes and intensive educational/therapeutic approach. Extensive parent component in program.

Staff Composition: Program Director, 1 Head Teacher, 2 Teachers, 1 Assistant Teacher, 1 Physical Therapist, 1 Occupational Therapist, 1 Speech Therapist, Community Liaison, Secretary.

Previous service to visually impaired or blind children: Yes. 3-6.

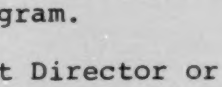
Vision Specialist: Yes, at least for initial screening.

Cost: $5,632 - rate for FY'83 - Half the tuition paid by LEA's, Half paid by other funding sources.

Transportation: Provided by town for special needs children, car pool by parents of non-special needs children.

Duration of Program: 9:00 a.m.-11:30 a.m.-School calendar and 5 week summer camp program.

Referall Process: Contact Director or Community Liaison person. Director: Pam Parsons-Community Liaison-Ann Brown.



BEDFORD RECREATION DEPARTMENT DAY CAMP

Town Hall, South Road
Bedford, MA 01730
(617) 275-1392
Serves adjoining towns plus Bedford
Contact: Ilsa Gottlieb

Services Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

Age Range: 3-15

Types of Children Served: Typical children, accomodations and adaptations for special needs.

Eligibility Requirements: None

Description of program: Typical Day Camp, Computer Camps, Theater Camp, Bila Trips (overnight trips), Canoe Trips, and Story Telling.

Staff Composition: Teachers, H.S. Students, College Students

Previous service to visually impaired or blind children: Yes

Vision Specialist: Adaptive Physical Eduation Teacher

Cost: Varies

Transportation: No

Duration of Program: 6 weeks

Referral Process: Call or Write

EARLY LEARNING CENTER
(Early Intervention Program at
Newton Guidance Clinic)

64 Eldredge Street
Newton, MA
(617) 969-4925
Serves Newton, Needham, Wellesley,
Weston
Contact: Amy Kahn

Services
Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Age Range: 0-3

Types of Children Served: Multiply-handicapped, developmentally delayed.

Eligibility Requirements: none

Description of program: The Early Learning Center is an early intervention program with both a center-based and home-based component. The children have diagnosed handicaps or developmental delays. Children and parents meet twice weekly at the center and are visited once a month by one or two staff members. A parent support group is also offered.

Staff Composition: Social Worker, Speech Pathologist, Physical Therapist, Pediatric Nurse Practitioner, O.T. Consultant, Medical Consultant.

Previous service to visually impaired or blind children: Yes, 0-3 years.

Vision Specialist: possible consultant.

Cost: bill insurance companies.

Transportation: provided.

Duration of Program: year round.

Referral Process contact:Amy Kahn, we do intake home visits, and arrange program involvement.

ELIOT CHURCH NURSERY SCHOOL

474 Centre Street
Newton, MA 02158
(617) 244-3639
Serves Newton & vicinity
Contact: Barbara C. Lane

Services Provided:

Medical ☐
Social ☐
Educational ☒
Recreational ☐

Age Range: 2 years 9 months - 5 years.

Types of Children Served: All

Eligibility Requirements: Not accessible for wheel chairs, not set up for changing diapers.

Description of program: The Eliot Church Nursery School offers morning and afternoon sessions for 3 and 4 year olds. You can choose between a 3 or 5 day a week program with an option of an extended program for 9-2:30. The program is intended to foster creative learning and social adjustment for normal as well as special needs preschoolers. The school is licensed for special needs children and eligible for 766 funding.

Staff Composition: Director/Teacher, 4 Teachers, Student Teachers.

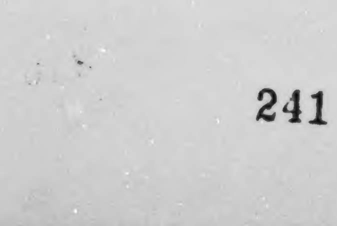
Previous service to visually impaired or blind children: Yes, 3 and 4 years.

Vision Specialist: Yes

Cost: $600-$800 depending on program, some financial assistance available.

Duration of Program: 9:00-11:30, 12:30-2:30

Referral Process: Usually through Edco-Newton



ENABLE, INC.
COMMUNITY RESOURCE CENTER

3 Randolph Street
Canton, MA 02021
(617) 828-2440 X300
Serves South Norfolk County
Contact: Joy Sterneck

Services
Provided:

Medical ☒
Social ☒
Educational ☐
Recreational ☐

Age Range: Birth to Seven.

Types of Children Served: Any child with special needs. Area of expertise is the physically disabled.

Eligibility Requirements: None. All children birth to seven.

Description of Program: Community Resource Center is an outreach program funded by the Dept. of Public Health. It provides training, consultation, and support for families of young special needs children, their school mates, teachers, and other community staffs in their own settings - i.e., homes, nursery schools, day care centers, and public schools. It is hoped that through this training and support children can be maintained in the least restrictive environment. Our program does not provide direct service on an ongoing basis.

Staff Composition: A program director, two social workers, one occupational therapist, one physical therapist, one child development specialist, one psychologist, two special education teachers, and one speech and language pathologist.

Previous service to visually impaired or blind children: Yes - one five year old. We also have three parents of visually impaired young children in our parent support group.

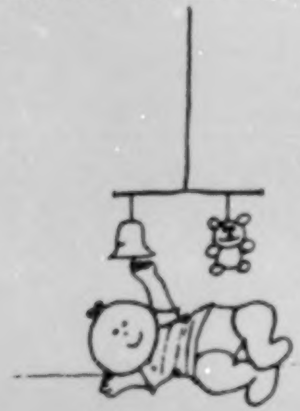
Vision Specialist: We have used Commission For The Blind as the visual consultant.

Cost: Free of charge.

Transportation: Non-applicable

Duration of Program: Non-applicable

Referral Process: Anyone can call.



FRAMINGHAM CENTRE NURSERY SCHOOL

24 Vernon Street
Framhingham, MA 01701
(617) 875-8260
Serves Framingham, Natick, Ashland, Sudbury, Wayland, Holliston.
Contact: Janet Moscarelli
Director

Services Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

Age Range: 2.9 - 5 years.

Types of Children Served: Toddlers, Pre-kindergarten, Special Needs.

Eligibility Requirements: Fully mobile due to stairways.

Description of Program: No response.

Staff Composition: Early Childhood Training
One Special Needs Consultant
On R.N.

Previous service to visually impaired or blind children: Yes, 3-5.

Vision Specialist: No.

Cost: See our rate sheet.

Transportation: No response.

Duration of Program: Monday - Friday, 9:00 a.m. to 2:45 p.m., September thru June.

KENNEDY-DONOVAN CENTER FOR PROGRAMS IN EARLY DEVELOPMENT

Services Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Lewis School
Mechanic Street
Foxboro, MA 02035
(617) 543-2542
Serves Attleboro, Foxboro, Mansfield, Norfolk, N. Attleboro,Norton, Plainville, Sharon, S. Attleboro, Walpole, Wrentham
Contact: Judity Wheiler, Team Header

Age Range 0-3 years

Types of Children Served: Children at risk: biological, established or environmental risk including neuro-muscular, speech, hearing or language C.P., M.R. or failure to thrive.

Eligibility Requirements: None

Description of program: Home and center based programs for children at risk for abnormal development or who have identified handicapping condition.

Staff Composition: 2 R.N.'s, 2 P.T.'s, 1 Social Worker, 1 Speech and Language Specialist.

Previous service to visually impaired or blind children: Yes, 1 presently, 2 years old.

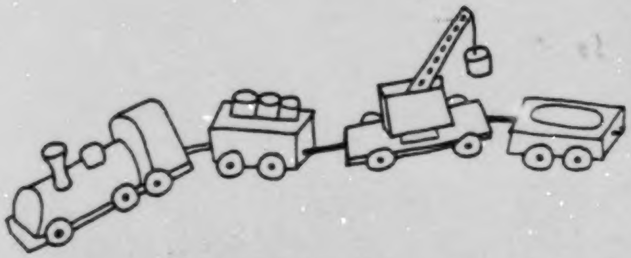
Vision Specialist: No response

Cost: Free

Transporation: To eligible families.

Duration of Program: All year long.

Referral Process: call to center by parent or other, or agency and we follow up to see if appropriate.



MAINSTAY: A CENTER FOR CHILDREN WITH SPECIAL NEEDS

Services Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

E. Militia Heights off Forest St.
Needham, MA 02192
Box 169
(617) 444-6634
Serves reasonable commute
Contact: Paula Brennan

Age Range: 0-3

Types of Children Served: developmentally delayed or disabled for any reason (Down's Syndrome, C.P., Neurologicaly Impaired, Rubella, etc.)

Eligibility Requirement: None

Description of your program: Early intervention education and therapy for 0-3 year old children and their families Parent group - advocate services - follow-up.

Staff Composition: Language Pathologist (full-time), Physical Therapist (part-time), two Teachers, 1 Aide with Teaching background (full-time).

Previous service to visually impaired or blind children: Yes, ages 0-3.

Vision Specialist: No

Cost: 2% of annual income - annual tuition.

Transportation: none provided.

Duration of Program: conventional school year (center-based program), Home program year round.

Referral Process: Call for appointment.

MARLBOBO-WESTBORO EARLY INTERVENTION PROGRAM at Ctr for Better Living

57 Union Street
Marlboro, MA
(617) 481-2100
Serves Marlboro, Westboro,
Northboro, Southboro, Hudson
Contact: Patrice Birenberg,
Rachel Cooney, Laura Hausman

Services
Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Age Range: 0-3

Types of Children Served: all types of developmentally delayed children and/or with birth defects.

Eligibility Requirements: None

Description of program: This early intervention program has a strong home-based component. One team member conducts regular home visits. As part of the center based component parents can share with other parents and observe their child interact with staff members. Parents may also participate in the staff child interaction. After an initial team evaluation, a program of treatment is planned for each child.

Staff Composition: 3 Social Workers, 1 Teacher, 1 O.T. 1 P.T., 1 Speech Therapist.

Previous service to visually impaired or blind children: three now in program - 10 months, 13 years, and 2½years.

Vision Specialist: Yes, Consultant at U Mass Early Intervention Program

Cost: Insurance covers our program, if no insurance there is a sliding scale according to income.

Transportation: available by Dept of Ed.

Duration of Program: All year - child may be in the program until he/she is 3.

Referral Process: Referrals are accepted by Dr., Parents, Social Service, Medical establishment, etc.

MYSTIC VALLEY EARLY INTERVENTION PROGRAM

15A High Street
Winchester, MA 01890
(617) 729-3094 or 3095
Serves Arlington, Burlington, Lexington, Winchester, Wilmington, Woburn
Contact: Leah C. Nazarian, Program Director

Services Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

Age Range: Birth to three years old.

Types of Children Served: Children with or at risk for established biologic or developmental delay due to environmental factors.

Eligibility Requirements: None

Description of program: This program's purpose is to maximize each child's potential and support the family of the special needs child. Children are grouped by age into a strucured, therapeutic class. Parents join the children for part of each session and then meet together over coffee. Home visits are a regular part of the program. Parents and staff write an educational plan with goals for each child.

Staff Composition: Teacher, O.T., P.T. Speech Therapist, Aide, Nurse.

Previous service to visually impaired or blind children: Yes, birth to three.

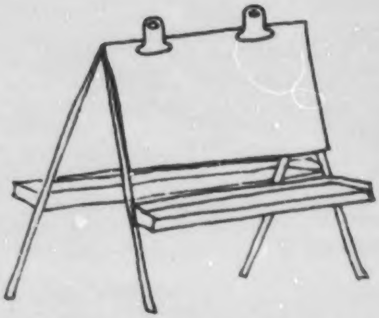
Vision Specialist: No

Cost: Third party reimbursement

Transportation: Provided by DOE

Duration of Program: 12 months

Referral Process: Anyone



NEIGHBORHOOD SUPPORT SYSTEMS FOR INFANTS

38 Union Square
Somerville, MA 02143
(617) 623-8402
Serves Cambridge and Somerville
Contact: Sheila Botein, Director

Services Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

Age Range: 0-3 years.

Types of Children Served: A wide variety of special needs including diagnosed disabling conditions, chronic medical conditions, environmental risk or developmental delay.

Eligibility Requirements: None

Description of Program: NSSI is a home based parent support and early intervention program for special needs children under age three. Home visitors are experienced mothers from the communities served who are trained in child development. In addition to weekly home visits which focus on stimulation activities and growth and development information, NSSI also has a monthly drop-in for mothers. They bring their children under age three for child care provided by the NSSI staff while they have coffee and make craft items or toys in an adjoining room.

Staff Composition: Director (Early Childhood Educator), occupational therapist, pediatric nurse practitioner and three core mothers (home visitors), also an administrative secretary.

Previous service to visually impaired or blind children: Yes, to age three.

Vision Specialist: No response

Cost: No charge to families.

Transportation: No response.

Duration of Program: No response.

Referral Process: Call the NSSI office and speak with one of the administrative staff members.

Services
Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

SMOC DAY CARE

King School
Water Street
Framingham, MA 01710
(617) 877-1961
Serves Framingham, Marlboro, Natick, Ashland, and environs
Contact: Jeanie Lindquist

Age Range: 2-6

Types of Children Served: All types.

Elgibility Requirements: Children must be 2.9 years and toilet trained. Special need children are considered on a case by case basis.

Description of program: This center serves 58 children in three classrooms. There are 9 full time and 2 part time teachers all of whom have degrees or training and experience in early childhood education.
We seek to provide healthy, safe and loving environment which is conducive to learning and personal growth. We believe in the individuality of each child and strive to nurture the child's positive self-image, develop her/his potential to the fullest, strengthen family relationships, and create a cooperative, secure atmosphere in which to learn.

Staff Composition: As above.

Previous service to visually impaired or blind children: yes, to age 6 or 7.

Vision Specialist: No

Cost: No response.

Transporation: No response.

Duration of Program: No response.

Referral Process: Call SMOC directly for further information.

SNCARC-EARLY INTERVENTION PROGRAM

Box 552
Norwood, MA 02062
(617) 762-4001
Serves Canton, Dedham, Foxboro, Medfield, Millis, Norfolk, Norwood, Plainville, Sharon, Walpole, Westwood, Wrentham
Contact: Susan Biagini
OTR, Director

Services Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Age Range: Birth to three

Types of Children Served: Children at risk or demonstrate developmental delays due to 1) premature birth; 2) a condition or diagnosis present at birth, or 3) whose developmental milestones (in one or more areas) are slow.

Eligibility Requirements: See above.

Description of program: The SNCARC Early Intervention Program is designed to support and encourage parents as well as teach therapeutic skills. There is a center-based and home-based component. A mother-toddler-infant group meets weekly to enhance socialization skills in the children and offer support to parents. A regular home visit is scheduled with the family by a therapist.

Staff Composition: Occupational Therapists, Physical Therapist, Social Workers, R.N., Special Needs Teacher, Speech and Language Therapist.

Previous service to visually impaired or blind children: Yes.

Vision Specialist: Boston Center for Blind Children has offered (and we have used) consultation in the past.

Cost: DPH programs - no cost.

Transportation: Home based programs

Duration of Program: 12 months.

Referral Process: Child may be referred by any professional agency, parent. Intake worker completes form at time of referral and requests that parent call program directly. Within 7 days of parents call a social worker or nurse will schedule a home visit.

SOUTH SHORE EDUCATIONAL COLLABORATIVE

19 Fort Hill Street, I Quarters
Hingham, MA 02043
(617) 749-7518 or 749-7519
Serves Braintree, Cohasset, Hingham, Hull, Norwell, Quincy, Scituate, and Weymouth.
Contact: Michael J. Savage, Ed.D.
Executive Director

Services Provided:

Medical ☐
Social ☒
Educational ■
Recreational ☐

Age Range: 3 - 21

Types of Children Served: Multi-handicapped, developmentally delayed autistic, language impaired, emotionally disturbed/behaviorally disordered.

Eligibility Requirements: Referral from local school system.

Description of Program: The collaborative has many programs serving the moderately handicapped to the profoundly handicapped. There are also programs for parents. Specific services for the visually impaired are as follows: We employ an itinerant teacher of the visually impaired. This individual provides consultation, direct services, and evaluation to students. Our multi-handicapped program serves a number of visually impaired and legally blind students. They are served by a staff member certified as a teacher of the visually impaired. In addition, the itinerant teacher provides services to this program.

Staff Compostion: The staff consists of a full range of educational, psychological and therapeutic professionals.

Previous service to visually impaired or blind children: Yes, 3 and up.

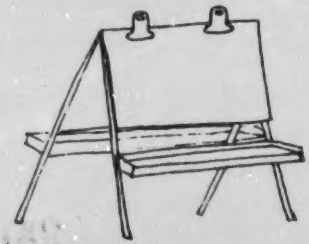
Vision Specialist: Yes.

Cost: No response.

Transportation: No response.

Duration of Program: Some are school year, while others are 12 months.

Referral Process: LEA Administrator of Special Education.



WALTHAM HOSPITAL EARLY INTERVENTION PROGRAM

Hope Avenue
Waltham, MA 02254
(617) 647-6564
Serves Waltham, Watertown and Belmont
Contact: Lorraine Sanik, Director

Services Provided:

Medical ■
Social ■
Educational ■
Recreational ☐

Age Range: 0-3 years.

Types of Children Served: Developmentally delayed; premature; physically and or mentally handicapped; hearing impaired; language delayed.

Eligibility Requirements: Appropriateness for group as assessed by staff.

Description of Program: Home base and center base programs. Services are determined by child's needs. Child has home visitor from the interdisciplinary team. Other services may include developmental stimulation, children's groups, and parent support groups all designed to fulfill child's potential.

Staff Composition: Education, Physical Therapy, Speech Therapy, Nursing, Social Work.

Previous service to visually impaired or blind children: Yes, ages 0-3 years.

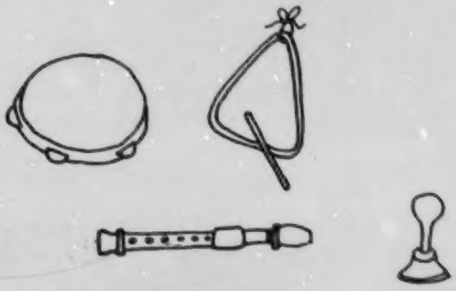
Consultant in Vision: No.

Cost: Covered by Department of Public Health and third party reimbursement.

Transportation: Yes.

Duration of Program: Variable.

Referral Process: Call program.



WEST ROS PARK EARLY INTERVENTION PROGRAM OF SBCS, INC.

780 American Legion Highway
Roslindale, MA 02131 325-6700 X120
Serves Roslindale, Hyde Park,
West Roxbury
Contact: Sandy Sachs

Services Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Age Range: Birth to 3

Types of Children Served: Children with diagnosed handicapping conditions, developmental delays, "environmental risks"

Eligibility Requirements: None. Unless family needs can be met by less intensive community services.

Description of program: The WRP EIP program is both home and center based with each family receiving home based services. An IEP and treatment plan is written for each child. We currently provide 2 toddler groups, a mother baby group and 2 parent support groups. The diagnostic intake is 4 sessions long and include family and developmental intake, an area and an assessment meeting of the transdisciplinary team.

Staff Composition: O.T., part-time P.T., S.W. Psy. Nurse, Infant Toddler Specialists, Child Development Para Professional, Director. Consultants: Speech, Devel. Pediatrics, Child Psy., Expressive Therapy

Previous service to visually impaired or blind children: Yes, ages 2-3.

Vision Specialist: No

Cost: Sliding Scale, Medicard, Blue Cross are accepted.

Transportation: to toddler groups is provided by DOE; to mother/baby group is provided by Dept. of Mental Health.

Duration of Program: Year round.

Referral Process: Call EI staff member at the program.

REGION V

Agency	Services Provided	Page
Cape Cod Child Development Program, Hyannis	Educational, Social	59
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Kennedy-Donovan Center, New Bedford	Educational	61
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Project Early, Norton	Educational	63
I.H. Schwartz Children's Rehabilitation Center, New Bedford	Educational, Medical and Social	64
Self Help Inc., Brockton	Educational	65
Taunton Area Early Intervention Program, Taunton	Educational	66

CAPE COD CHILD DEVELOPMENT PROGRAM, INC.
EARLY CHILDHOOD INTERVENTATION PROGRAM

Services
Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

83 Pearl Street
Hyannis, MA 02601
(617) 771-4090 or 775-6240 (message)
Serves Cape Cod, Wareham, Martha's Vineyard, Nantucket
Contact: Barbara Prindle-Eaton

Age Range: Birth to three

Types of Children Served: Developmentally disabled, delayed and at risk children and their families.

Eligibility Requirements: Eligibility is determined on an individual basis.

Description of program: Home and Centerbase services. Parent support and education. Toy and Resource lending library. Transition and advocacy support. Services to parents include weekly home visits, weekly parent support group and monthly evening workshops.

Staff Composition: Program Director, Coordinator, 2½ Developmentalists, full-time P.T. and O.T., ½ Time Speech/Language Therapist, Part-time Teacher Assistant, Part-time Social Service/Intake Assistant.

Previous service to visually impaired or blind children: Yes, Birth to three

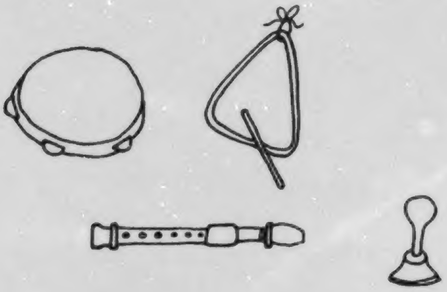
Vision Specialist: Yes, Consultant

Cost: None

Transportation: None

Duration of Program: Centerbase 1x/week for 2 hours, home visits weekly

Referral Process: Referrals may be made by parents or professionals.



HANDI-KIDS - THERAPEUTIC RECREATION COMPLEX

Services Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

470 Pine Street
Bridgewater, MA
(617) 697-7557
Serves all towns in the southeast region of MA
Contact: Patti Phillips, R.T.

Age Range: 2-elderly.

Types of Children Served: Mentally, Physically and/or Emotionally Impaired.

Eligibility Requirements: No necessary requirements.

Description of program: We offer a variety of recreational activities to meet the needs of the participants, dependent on their age and disability.

Staff Composition: Program Director, Ass. Program Director, and Volunteers and Interns.

Previous service to visually impaired or blind children: Yes, all ages

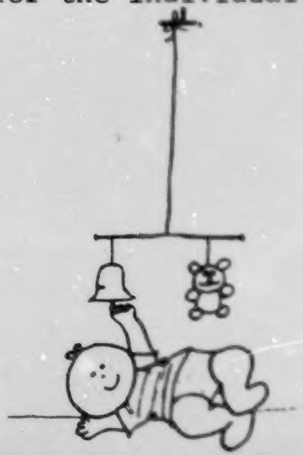
Vision Specialist: No

Cost: No fee.

Transportation: Provided by participant.

Duration of Program: Seasonal programs last 10 weeks-(fall, winter, spring) - Summer is four two week camp sessions.

Referral Process: Each participant is met first by the Program Director to determine if the program desired is appropriate for the individual.



KENNEDY DONOVAN CENTER

80 Rivet Street
New Bedford, MA
(617) 992-4756
Serves Greater New Bedford and
Fall River.
Contact: David C. Erickson

Services
Provided:

Medical ☐
Social ☑
Educational ■
Recreational ☐

Age Range: 0 - 22

Types of Children Served: Multi-handicapped.

Eligibility Requirements: Multi-handicapped (mental retardation/ physical disability).

Description of Program:
1. Early Intervention - Birth to 3 years.
2. Developmental Day Program - 3-22 years.

Staff Composition: Special education, nursing, physical therapist, occupational therapist, speech therapist, psychological/social service counselor.

Previous service to visually impaired or blind children: Yes, 0-20.

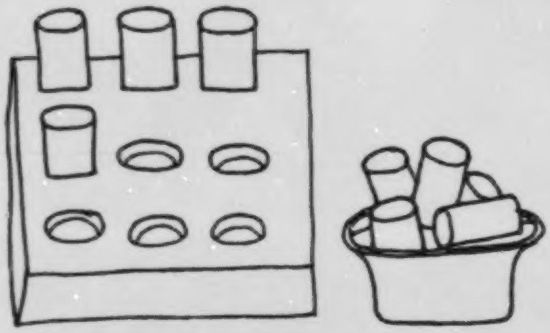
Vision Specialist: From local school departments.

Cost: No charge to families.

Transportation: Provided by local school departments.

Duration of Program: Open year round.

Referral Process: Call contact person.



Services
Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

PILGRIM AREA COLLABORATIVE

1456 Ocean Street
Marshfield, MA 02050
(617) 837-1311
Serves Duxbury, Plymouth,
Marshfield, Pembroke, Halifax,
Kingston
Contact: Shiela Beauluie

Age Range: 3-8

Types of Children Served: Multihandicapped Deaf/Blind, Developmentally Delayed, Learning Disabled.

Eligibility Requirements: At least 1 year delay in developmental skill areas such as gross motor, fine motor, language, cognitive, social emotional.

Description of program: Self contained pre-school classrooms servicing children with a variety of handicapping conditions that include neurologicaly impaired, low functional vision, hearing loss, C.P.

Staff Composition: Early Childhood Special Education Teachers, Speech and Language Pathologists, Occupational Therapists, Physical Therapists, Psychologist, Registered Nurse.

Previous service to visually impaired or blind children: Yes, age range from 4-8 years.

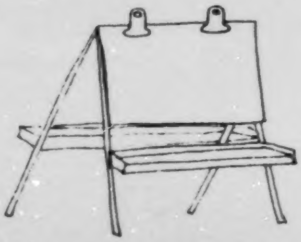
Vision Specialist: Yes

Cost: $3,400 per year. (does not include summer program)

Transportation: Special Education Cabs

Duration of Program: 180 days

Referral Process: Referred from outside agencies to local speech director. Two day team evaluation programs, team meeting entrance into programs.



PROJECT EARLY

315 West Main Street
Norton, MA 02766
(617) 226-0527
Serves Norton, Easton, Mansfield, Foxboro.
Contact: Margaret M. Werner

Services Provided:

Medical ☐
Social ☐
Educational ☒
Recreational ☐

Age Range: 3-6

Types of Children Served: Moderate to Severe.

Eligibility Requirements: Mobility.

Description of Program: Project Early serves two levels of children - moderate (children with speech, language, behavior or orthopedic needs who will eventually enter public schools with limited special needs). Severe (children with developmental delays that may result in placement in 502.4 placements when they enter regular programming.

Staff Composition: Early Childhood Teachers (3), Speech/Language Therapists (2), Early Childhood Psyschologist (1).

Previous service to visually impaired or blind children: Yes, Cortically Blind Child is presently in program, age 4.

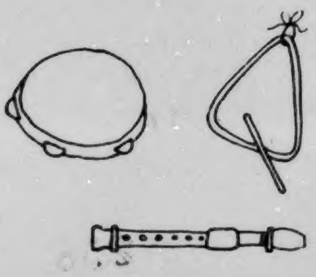
Vision Specialist: Have utilized Boston Center for the Blind.

Cost: 5,000 per half day, 5 days per week.

Transportation: Provided by Local Districts.

Duration of Program: 180 days, 2½ hrs. per day 5 days per week.

Referral Process: Referral through Project Early Office
315 West Main Street
Norton, MA 02766



I.H. SCHWARTZ CHILDREN'S REHABILITATION CENTER

374 Rockdale Avenue
New Bedford, MA
(617) 996-3391
Serves Greater New Bedford
Contact: Mrs. Louise Cohen, Education Coordinator

Services Provided:

- Medical ☒
- Social ☒
- Educational ☒
- Recreational ☐

Age Range: 0-17 years old.

Types of Children Served: Children in need of speech, occupational therapy, or physical therapy.

Eligibility Requirements: None.

Description of Program: A comprehensive medical rehabilitation center designed to provide physical restoration, speech, occupational and audiology programs for children physically or developmentally disabled in order to maximize mobility, self care, communication and developmental skills.

Staff Composition: Therapists trained in above fields, nurses, consulting doctors.

Previous service to visually impaired children: Yes, ages 0-17 years.

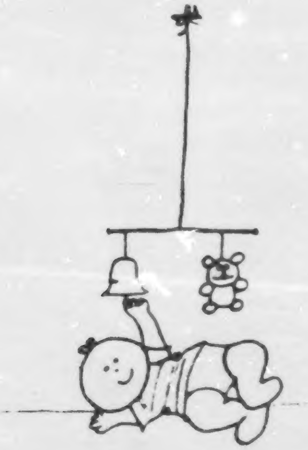
Vision Specialist: Some children have consultants from local school departments.

Cost: Sliding scale fees.

Transportation: Have own buses.

Duration of Program: 8:00 - 3:330 five days a week.

Referral Process: Referrals from pediatricians, school departments, social workers.



Services
Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

SELF HELP INC. HEAD START

20 Union Street
Brocton, MA 02401
(617) 587-1716
Serves Greater Brockton Area
Contact: Special Needs Cordinator

Age Range: Three to five years

Types of Children Served: Any child whose family meets eligiblity requirements unless it's determined H.S. not the best placement to meet child's needs.

Eligilibity Requirements: None

Description of program: Self-Help, Inc. believes that parents are the best teachers of their child. They offer a home-based and center-based program to help parents learn to teach their children well. In weekly home visits parents and teacher plan weekly lessons. One morning a week the child participates in a classroom experience Monthly parent meeting are also planned.

Staff Composition: Center Staff: Head teacher, Teacher, Nurse Family Worker, Other: Education Specialist, Health Coordinator (R.N.), Special Service Coord., Parent Involvement Coord.

Previous service to visually impaired or blind children: Yes, three and four.

Vision Specialist: No

Cost: Free if client meets Federal income guidelines or program guidelines for a limited number of overincome families.

Transportation: provided.

Duration of Program: October to June.

Referral Process: The referring party may be the child's parent(s) or an agency. If the referring party is an agency, the parents(s) must be aware the referral is being made. A telephone call is all that's necessary.

TAUNTON AREA EARLY INTERVENTION PROGRAM

1 Hill Street
Taunton, MA 02780
(617) 823-5327
Serves Taunton, Raynham, Lakeville
Contact: Catherine Finn

Services Provided:

Medical ☐
Social ☒
Educational ☒
Recreational ☐

Age Range: 0-3 years

Types of Children Served: Any child who is presently, or is 'at risk for' delays in one or more areas of development.

Eligibility Requirements: (same as above)

Description of program: Developmental Screening and Assessments, Individualized and Group Programming through weekly Nursery Classes, Parent Groups, Home Visiting, Sibling Group and Lending Library.

Staff Composition: 2 Early Childhood Special Educators, 2 Speech/Lang Pathologists, 2 Occupational Therapists, 1 M/S.W., 1 Physical Therapist, 1 R.N.

Previous service to visually impaired or blind children: Yes, 0-3 years.

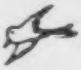
Vision Specialist: No

Cost: Not Applicable

Transportation: Yes

Duration of Program: year round

Referral Process: Contact to program can be made by parent or professional.



REGION VI

Agencies	Services Provided	Page
Boston Public School Vision Resource Services, Boston	Educational	68
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Parent-Sitter Connection, Brighton	Social	75
Thom Montessori Pre-School, Boston	Eductional	76

Services
Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

BOSTON PUBLIC SCHOOL VISION RESOURCES SERVICES

515 Hyde Park Avenue
Roslindale, MA 02131
(617) 327-4129
Serves Boston.
Contact: Mary Jane Drinkwater

Age Range: 3-22

Types of Children Served: Visually Impaired, Visually Impaired Multi-Handicapped.

Eligibility Requirements: Age 3-22, vision impairment, residence in Boston.

Description of program: The goal of the program is to provide to students whose vision is interfering with learning, the support and services they need. All services provided are designed to help the child move to a less restrictive education environment. Services are provided by an itinerant vision teacher or in a separate vision class. An orientation and mobility program is also offered.

Staff Composition: All staff are certified by the State Department of Education in Vision and/or Orientation and Mobility.

Previous service to visually impaired or blind children: Yes

Vision Specialist: On Site.

Cost: Free to Boston Residents.

Transporation: Provided.

Duration of Program: Dependent on I.E.P.

Referral Process: Children are referred by the Mass Commission for the Blind, hospitals, parents, Educational Team Leaders

CAMP JOY - BOSTON PARKS AND RECREATION

Boston City Hall
Room 816
Boston, MA 02201
(617) 725-3469
Serves City of Boston
Contact: Josephine Ruggeri

Services Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

Age Range: 3 - adult.

Types of Children Served: All Disabilities.

Eligibility Requirements: None.

Description of Program: Emphasis is on recreation. Play with a purpose.

Staff Composition: Each program is supervised by a certified special needs teacher with an assistant. Most staff are students in a degree training program or have secured a position in a special needs program.

Previous service to visually impaired or blind children: Yes, but very few.

Vision Specialist: No.

Cost: $25.00 Registration fee.

Transportation: Door to door.

Duration of Program: Six weeks summer program (Days only).

Referral Process: Request an application from Parks and Recreations.

CHILDCARE RESOURCE CENTER

24 Thorndike Street
Cambridge, MA
547-1057 or 547-9861
Serves greater Boston area Cambridge, Somerville.
Contact: Nancy Mullin

Services Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: Birth to 6 years (after school program 6-12 years)

Types of Children Served: All types of childcare services re: mainstream as well as handicap services for children.

Eligibility Requirements: None

Description of program: We help parents and providers find immediate solutions to child care problems, by providing referrals and assistance to put individuals, programs and organizations in touch with each other.

Staff Composition: Child Care workers, Parents, Volunteers; experienced in many areas of child care, parenting and advocacy.

Previous Service to visually impaired or blind children: Yes

Vision Specialist: There are persons on staff with special needs experience.

Cost: nominal fee for workshops; free to parents.

Transporation: No

Duration of Program: No

Referral Process: Call Center for further information.

COMMUNITY MUSIC CENTER OF BOSTON

48 Warren Avenue, Boston, MA
(617) 482-7494
Serves Greater Boston Area
Contact: Katherine Bigger
Director, Music Therapist

Services Provided:

- Medical ☐
- Social ☐
- Educational ☐
- Recreational ■

Age Range: Early Childhood to Seniors.

Types of Children Served: Multi-handicapped. Those with Emotional Behavioral problems, Developmental Delays or Retardation, Learning Disabilities, or Physical Handicaps, as well as those in need of preventatives and Early Interventation Services.

Eligibility Requirements: None

Description of program: The Program Description Center offers a Music Therapy Program provides educational, recreational and therapeutic music services to those in the Greater Boston Area. Music Therapy, General Music Classes and children's classes are offered. Music activities are geared to help the student overcome Psychological, Physical and/or Developmental difficulties. Music Therapy places great emphasis upon enabling the student with special needs to function effectively in the home, the school and the community.

Staff Composition: Director of Music Therapy, 4 Part-time Regular Music Therapists.

Previous service to visually impaired or blind children: Yes, ages 3-7 years.

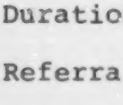
Vision Specialist: No

Cost: to be arranged.

Transportation: Not available to transport to the Center. Outreach sessions are available.

Duration of Program: To be arranged.

Referral Process: Assessment session and evaluation.



EARLY LEARNING: A CHILD-CARE & DEVELOPMENT CENTER

Services Provided:

Medical ☐
Social ☐
Educational ■
Recreational ☐

19 So. Street
Brighton, MA 02135
(617) 783-1318
Serves Greater Boston & Suburbs.
Contact: Joan Kibrick or
Richard Carson

Age Range: Birth - School Age.

Types of Children Served: Young children-no other restrictions.

Eligibility Requirements: Ability to adapt to child-care setting.

Description of Program: A center for infants and young children, where play, exploration, friendships and independence are encouraged. Daily activities include: Music-times, storytelling, exploring materials, mealtimes together, going outdoors, and opportunities for play and exploration in a playroom that is adapted to present challenges and space for movement for the young child.

Staff Composition: 2:6 ratio. Daily staff includes an early childhood special educator and a music specialist.

Previous service to visually impaired or blind children: Yes, a 2 yr. old.

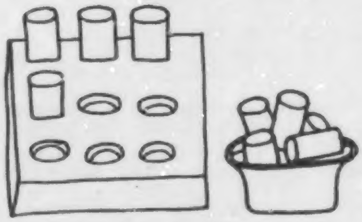
Vision Specialist: Yes, through the Boston Center for Blind Children.

Cost: P.T. $65.00, 3/4 T. $95.00, F.T. $115.00.

Transportation: Provided by parents.

Duration of Program: Monday thru Friday, 8:00 am-5:30 pm.
Weekend child-care available (overnight).

Referral Process: Call the Center at 783-1318.



Services
Provided:

Medical ☐
Social ☒
Educational ☐
Recreational ☐

GREATER BOSTON LEGAL SERVICES

85 Devonshire Street
Boston, MA 02109
(617) 367-2880
Serves Greater Boston Area
Contact: Individual Rights Unit
(Education Law)

Age Range: 3-21

Types of Children Served: Special Needs Children Eligible for special education under Ch 766 * PL 94-142 S504 (Rehab Act).

Eligibility Requirements: income requirements: must meet poverty guidelines (e.q.: family of 3 no more than $9,700 yearly gross income)

Description of program: legal representation of minors in Mass 766 matters (IEP meetings, Mediation, BSEA Hearings & Court.)

Staff Composition: 3 attorneys, 2 paralegals

Previous service to visually impaired or blind children: Unsure, but would serve them.

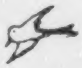
Vision Specialist: Not applicable

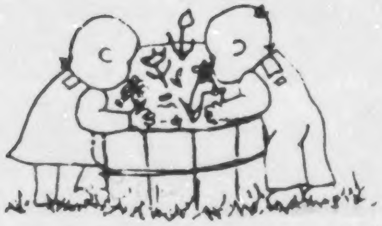
Cost: None specified

Transportation: Not applicable

Duration of Program: Not applicable

Referral Process: May call for information





JUDGE BAKER GUIDANCE CENTER

295 Longwood Avenue
Boston, MA 02115
(617) 232-8390
Serves Metropolitan Boston
Contact: Mary Phinney, Intake
Admission to Div 72 & 73 is through
Children's Hospital

Services Provided:

Medical ■
Social ■
Educational ☐
Recreational ☐

Age Range: Early Childhood through High School age.

Types of Children Served: Children with emotional, behavioral, and learning problems.

Eligibility Requirements: Not applicable

Description of program: Direct service to children and families. Outpatient clinic (diagnosis and treatment) Parent Place (an intervention program that teaches parents skills necessary for helping themselves and with behavioral, developmental and emotional issues). Family Support Center (an early intervention program designed to prevent later problems by helping families cope with loss.) In-patient unit where complex physical and emotional problems are treated.

Staff Composition: Psychiatry, Psychology, Social Work.

Previous service to visually impaired or blind children: Yes

Vision Specialist: No

Cost: No response.

Transportation: Not applicable

Duration of Program: year round.

Referral Process: Parents may call clinic directly.

PARENT-SITTER CONNECTION

Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

19 South Street
Brighton, MA 02135
(617) 783-1318
Serves Greater Boston and
surrounding suburbs
Contact: Joan Kibrick

Age Range: All ages

Types of Children Served: All types - no restrictions

Eligibility Requirements: None

Description of program: We are a referral service for sitters who want to do child-care in the child's home and for parents who need child-care services. Occasional, part-time and full-time.

Staff Composition: Not applicable

Previous service to visually impaired or blind children: Yes

Vision Specialist: N/A

Cost: Sitters set their own rate. There is a $25. fee to the families when a sitter is found and a $12. fee paid by the sitter for the connection. Call 783-1318.

Duration of Program: Not applicable

Referral Process: Parents may call office directly.

THOM MONTESSORI PRESCHOOL

315 Dartmouth Street
Boston, MA
(617) 266-1222 X29
Serves Greater Boston Area
Contact: Tom Gifford

Services Provided:

- Medical ☐
- Social ☐
- Educational ■
- Recreational ☐

Age Range: 2-6

Types of Children Served: Normal, with limited mainstreaming.

Eligibility Requirements: Flexible.

Description of program: The Thom Montessori School hopes to develop a child's self-esteem and awareness. Special needs children are mainstreamed into a morning group of 2-6 year olds. The teacher prepares a structured environment with a wide variety of educational materials and activities. Each child moves at his own pace.

Staff Composition: Director, 2 Full-time Teachers, 2 Part-time Teachers, Montessori Intern.

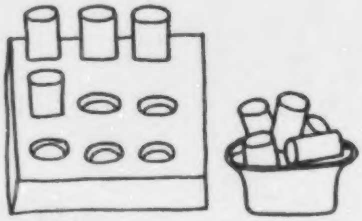
Previous service to visually impaired or blind children: Yes, 3

Vision Specialist: No-General Special Needs Consultant

Cost: Full day $3,680 - Half day $2,052

Duration of Program: Full time 8:15-5:30, Half day A.M. 8:15-12(or 1) P.M. 1-5:30.

Referral Process: Call and set up visit.



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BOSTON CENTER FOR BLIND CHILDREN

Services Provided:

Medical ☑
Social ☑
Educational ■
Recreational ☑

147 South Huntington Avenue
Boston, MA 02130
(617) 232-1710
Serves Massachusetts
Contact:
Children 0-3: Jennie Todd
Children 3-22: Jean Tates

Age Range: 0-22.

Types of Children Served: Visually impaired, multiple sensory impairments, mentally retarded, and behavioral disturbances, in combination.

Eligibility Requirements: Minimal ambulatory ability.

Description of Program: Day time education classes for ages 3-22. Residence for ages 6-22; a twenty four hour per day education and treatment center with formal school hours 9 a.m. until 3 p.m. Education and child care services conducted on a 1:1 and small group basis. Social service; child advocacy; family and community liaison work; health care.

Staff Composition: Interdisciplinary with special education teachers, speech and language pathologists, music therapist, family nurse practitioner, child care specialists, psychologists, physical therapists.

Previous service to visually impaired and blind children: All children are visually impaired or blind.

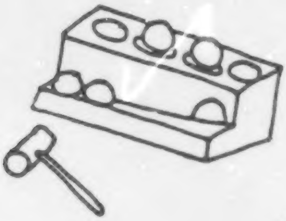
Vision Specialists: Yes.

Cost: For child in residence personal and health care expenses.

Duration of Program: 12 months.

Transportation: Provided by town.

Referral Process: Anyone may call to make an appointment to visit the program.



Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

CAMP WAPANACKI (OF THE N.Y. INSTITUTE F/T BLIND)

Hardwick, Vermont 05843
(802) 472-6612
Weekdays 9:00 a.m.-12:00 noon
Serves primarily Northeastern U.S.A.
Contact: Joe Ingram-Camp Director

Age Range: 6 -21

Types of Children Served: Primarily legally blind and visually handicapped.

Eligibility Requirements: Attached data sheet.

Description of Program: We offer visually-impaired young people a program fostering the development of recreational interests and skills. Campers participate in swimming, boating, athletics, arts & crafts, woodshop, music, nature study, or gardening. We are in the planning stages for a winter program which may contain a component for families having a visually handicapped member to participate as a family in winter recreational activiites, i.e. skiing, sledding, skating, etc... Interested persons should write for more information.

Staff Composition: Summer staff are primarily high school and college students working under the supervision of a core of professional staff. On staff for every 3 campers in the cabin living unit.

Previous service to visually impaired or blind children: Camp has operated program for blind since 1938.

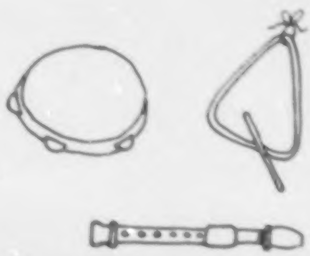
Vision Specialist: Yes, on site.

Cost: Summer camp costs:

Bus transportation round trip from Northampton, MA	$60.00
Laundry fee	20.00
Personal spending	10.00
1983 season fees	$90.00

Duration of Program: 3 weeks/session

Referral Process: Write for application form.



THE CARROLL CENTER FOR THE BLIND

770 Centre Street
Newton, MA 02118
(617) 969-6200
Contact: Rachel Ethier Rosenbaum,
Executive Director
Serves all of Massachusetts

Services Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

Age Range: All ages.

Types of Children Served: All blind or visually impaired children.

Eligibility Requirements: Legally Blind.

Description of Program: Mobility services, family and individual counseling, professional publication, volunteer service, and aids and appliances store.

Staff Composition: Orientation and Mobility specialists, counselors, recreation staff.

Previous experience with visually impaired or blind children: All ages.

Vision Consultant: We have certified teachers of the visually impaired primarily for mobility and counseling for children. Although we have wider expertise, this has been used mainly by adults.

Cost: Usually contracted by local school departments, occasionally Massachusetts Commission for the Blind (summer); counseling has been paid by cities and towns, except in one situation (paid by family)

Transportation: No response.

Duration of Program: Year round.

Referral process: Call agency for more information.

CARAVAN SOCIETY FOR CHILDREN, INC.

P.O. Box 357
Athol, MA 01331
(617) 249-4845
Serves any towns and cities in Massachusetts
Contact: Jane M. Laughton, Executive Director

Services Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ■

Age Range: 5-21 years.

Types of Children Served: A wide variety of special needs including diagnosed disabling conditions, chronic medical conditions, envirmontal risk or developmental delay.

Eligibility Requirements: Child must be ambulatory, toilet trained and capable of self-care skills.

Description of program: We operate Camp Caravan in South Royalston, MA. It is a residential camping facility for special needs children which was founded in 1944 as a private, non-profit charitable organization. We run an 8 week session and 2 four week sessions with an 80 camper capacity for each session. Our program is recreational consisting of Arts and Crafts, Nature Study. We are accredited by the American Camping Association and an affiliate of the United Way of Mass Bay.

Staff Composition: We employ a staff of 53. Our counselor-camper ratio is 2:10 or 1:5. We have an R.N. on duty 24 hours per day and an M/D. on call. We are affiliated with Athol Memoral Hospital.

Previous service to visually impaired or blind children: Yes, ages 5 through 21.

Vision Specialist: No

Cost: $125.00 per week

Transportation: Chartered bus service provided from Somerville YMCA to Camp Caravan at $20.00 round trip.

Duration of Program: 8 weeks or one of 2 four week sessions.

Referral Process: After January 1, 1984 write to:
Camp Caravan, P.O. Box 357, Athol, MA 01331

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ●

CHILDREN'S MUSEUM
SPECIAL NEEDS PROGRAM

Museum Wharf
300 Congress Street
Boston, MA 02210
(617) 426-6500 (office)
(617) 426-8855 (recorded happenings)
Serves Statewide
Contact Person: Paul Bert

Age Range: All ages.

Types of Children Served: All types.

Eligibility Requirements: None

Description of Program: Various touch exhibits, play space with activities for children under 5. "What If You Couldn't" exhibit on disabilities including vision. Resource library for parents. Books for teaching visually impaired children about science, etc. included. Braille and large print guides to Museum are available.

Staff Composition: Special needs person; museum guides.

Previous service to visually impaired or blind children: Yes, all ages.

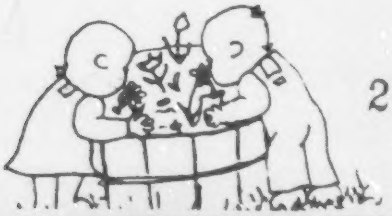
Vision Specialist: No

Cost: $4.00 Adult; $3.00 Children 5 yrs. and up; free to Children under 5; and free admission to all on Friday nights between 6 and 9 p.m.

Transportation: None

Duration of Program: Year Round - Tuesday, Wednesday, Thursday, Saturday, Sunday - 10 a.m. to 5 p.m.; Friday 10 a.m. to 9 p.m. Closed Mondays, except on Boston Public School holidays and in the summer.

Referral Process: Call the Museum if you have any questions.



Services
Provided:

Medical ☐
Social ◩
Educational ■
Recreational ☐

DELTA PROJECTS, INC.

21 Walden Square Road
Cambridge, MA 02130
(617) 492-8048
Serves Statewide-priority given
to DMH Region IV-A
Contact: Diane Lagulli

Age Range: 3-13

Types of Children Served: mentally retarded, multi-handicapped.

Eligibility Requirements: None

Description of program: Delta House serves children who are mentally retarded, developmentally delayed and multi-handicapped. The staff offers a 30 day parent training program, respite and outreach services. During the 30 day program children remain in residence for intensive training while parents receive a series of training sessions. Respite is provided from periods of 1 day to 2 weeks. The outreach program provides home-based training and consultation to families.

Staff Composition: Generally 1 direct care staff to 3 children. Program also has an R.N., a parent trainer, and a program director.

Previous service to visually impaired or blind children: Yes.

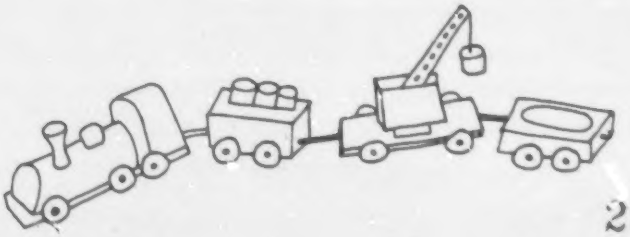
Vision Specialist: No

Cost: $69.22/day

Transportation: not provided.

Duration of Program: respite up to 2 weeks, parent training 30 days.

Referral Process: Parents/ guardians/caseworker call agency.



Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

DEVELOPMENTAL DISABILITIES LAW CENTER

294 Washington Street, Suite 840
Boston, MA 02108
(617) 426-7020
Serves Massachusetts
Contact: Intake Worker

Age Range: Developmentally disabled - all ages.

Types of Children Served: Developmentally disabled.

Eligibility Requirements: Income Eligiblity.

Description of Program: Legal representation and technical assistance with legal problems related to a developmental disability.

Staff Composition: 2 lawyers, 2 law students and a paralegal.

Previous service to visually impaired or blind children: Yes.

Vision Specialist: No response.

Cost: No charge to families.

Transportation: No response.

Duration of Program: No response.

Referral Process: No Response.

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ☒

DISCOVERY ROOM, MUSEUM OF SCIENCE

Science Park
Boston, MA
(617) 723-2500 X344
Serves Massachusetts school
groups free/open to public
Contact: Rhonda Sasso

Age Range: 4-9

Types of Children Served: "hands-on" program - ideal for tactile exploration for all children.

Eligibility Requirements: None

Description of program: A "hands-on" science exploration area. Science objects including rocks, minerals, shells, bones, animal mounts, etc. are displayed for investigation by youngsters. Adult volunteers introduce the program and assist adults and children with activities.

Staff Composition: 1 full-time staff supervisor, 4 volunteers per day.

Previous service to visually impaired or blind children: Yes, individual children with parents/groups of school age children.

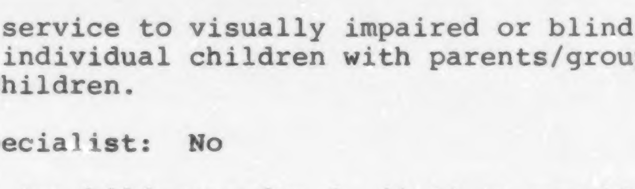
Vision Specialist: No

Cost:Free to children under 5, $3.00 to age 16 & 65 or over, $4.00 over 16, $5.00 adult, half price admission for all Friday nights after 5 p.m. Planetarium 50¢ extra. Children under 5 not normally admitted.

Transportation: Up to group

Duration of Program: Open 9-4 Tuesday through Thursday, Friday 9 a.m. - 10 p.m., Saturday, Sunday, Holidays and July - August 9-5.

Referral Process: Not applicable



FEDERATION FOR CHILDREN WITH SPECIAL NEEDS

312 Stuart Street
Boston, MA 02116
(617) 482-2915
Serves State of Massachusetts
Contact: Betsy Anderson

Services Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: All.

Types of Children: Special Needs.

Eligibility Requirements: None specified.

Description of Program: A center for parents and parent organizations to work together to serve children with special needs and their families. Parent training in special education laws. Collaboration between parents and health care professionals. Lay advocy training. Information and Referral.

Previous Service to visually impaired or blind children: Yes.

Vision Consultant: No response.

Cost: Varies with programs.

Tranportation: No response.

Duration of Program: Year round; some workshops are short term.

Referral Process: Call the Federation for an update on the services they currently offer. The New England Parents Association for Visually Handicapped Children and Adults is under this umbrella organization.

INFORMATION CENTER FOR INDIVIDUALS WITH DISABILITIES, INC.

20 Park Plaza, Suite 330
Boston, MA 02116
(617) 727-5540
Toll free in MA: (800) 462-5015
Serves: No restriction.
Contact: Ms. Susan Pirko

Services Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: No restriction.

Types of Children Served: All disabilities.

Eligibility Requirements: None.

Description of Program: We provide information on a wide variety of subjects of interest to disabled person, e.g., transportation, housing, recreation, employment, etc. Parents may find us very helpful.

Staff Composition: Information Specialists, Resource Developers.

Previous service to visually impaired or blind children: Parents of these children.

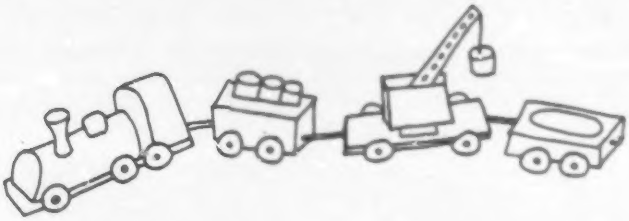
Vision Specialist: No response.

Cost: No response.

Transportation: No response.

Duration of Program: No response.

Referral Process: No response.



INTERNATIONAL INSTITUTE FOR VISUALLY IMPAIRED, 0-7, INC.

EARLY YEARS EDUCATION AND SUPPORT GROUP (EYES).

PROJECT OUTREACH USA

14 Gay Street
Newtonville, MA 02160
(617) 426-5567
Serves Nation, World-wide.
Contact: Sherry Raynor

Services Provided:

- Medical ☐
- Social ■
- Educational ■
- Recreational ☐

Age Range: Birth to Seven.

Types of Children: All blind or visually impaired preschoolers.

Eligibility: As above.

Description of Program: IIVI is the only organization in the world devoted solely to the collection, development, and dissemination of information, materials, and services for infant and young blind or visually impaired children. EYES - parent information center, parent support groups. Federally funded, Project Outreach USA is assisting others in establishing services or improving services for preschool blind and visually impaired.

Staff Composition: Volunteers. Project Outreach USA - Director, Education Coordinator, Parent Coordinator, several specialists in support services.

Previous service to visually impaired children: Yes.

Vision Specialist: Project Outreach USA staff.

Cost: Federal government covers some programs. Fees, contracts arranged.

Transportation: Not applicable.

Duration of Program: On-going.

Referral Process: Call the Institute for more information.

I.I.V.I.

LIONS GALLERY OF THE SENSES

Wadsworth Atheneum
Hartford, CT 06103
(203) 278-2670
Serves Connecticut and Massachusetts
Contact: Sally Williams

Services Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ☒

Age Range: All ages welcome

Type of Children Served: All types

Eligibility Requirements: None

Description of program: The Lions Gallery is a gallery within Hartford's art museum. the Wadsworth Atheneum, which presents art exhibitions that are accessable to persons with all types of handicaps. The exhibitions vary in content,but always can be enjoyed by the use of more than simple looking. Often they explore sound, sometimes smell and touch, and even taste. Gallery guides are always available to welcome visitors and help in any way necessary. Visits to the gallery are free.

Staff Composition: Not described.

Previous service to visually impaired or blind children: Many - of all ages

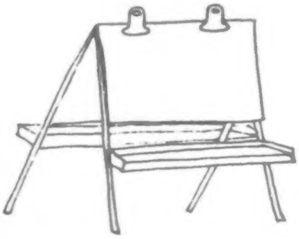
Vision Specialist: as consultants as we plan our exhibitions.

Cost: None

Transportation: No response.

Duration of Program: five exhibitions a year.

Referral Process: Call for further information.



MASSACHUSETTS AUDUBON SOCIETY

789 Main Street
Hampden, MA 01036
(617) 259-9500
Serves Massachusetts
Contact: Tiffany Fliss

Services
Provided:

- Medical ☐
- Social ☐
- Educational ☐
- Recreational ■

Age Range: All ages

Types of Children Served: All.

Eligibility Requirements: None

Description of program: Laughing Brook is an Education Center and Wildlife Sanctuary owned and operated by the Mass. Audubon Society. There are 259 acres of fields and woodlands and over four miles of trails. There is a Touch and See Trail for the blind and visually handicapped. Birthday parties with Mother Westwind. Natural history and environmental education programs for children, families and school groups.

Staff Composition: No response.

Previous service to visually impaired or blind children: Yes

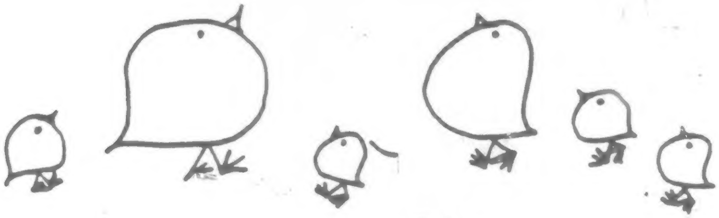
Vision Specialist: No

Cost: $2.00 Adults, $1.00 Senior Citizens, $1.00 Children under 16, Free to MAS members.

Transportation: No

Duration of Program: Open all year. Tues-Sun 10-5.

Referral Process: Call for further information.



MASSACHUSETTS COMMISSION F/T BLIND

110 Tremont Street
Boston, MA
(617) 727-5550
Serves State-wide
Contact: Regional Childrens' Social Workers

Services Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

Age Range: Birth-Death; childrens' services 0-14

Type of Children Served: Any legally blind child in Massachusetts.

Eligibility Requirements: Legal blindness and residence in Massachusetts.

Description of program: MCB offers a wide array of services to legally blind children and their families including counseling, advocacy, infant stimulation, activities of daily living and case management. Financial Assistance is available to those meeting the eligibility requirements.

Previous service to visually impaired or blind children: Serves all visually impaired children.

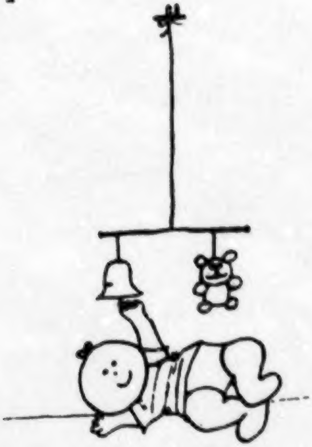
Vision Specialist: Not applicable

Cost: None

Transportation: Not applicable

Duration of Program: year round

Referral Process: Parents may call Mass. Commission for the Blind directly.



MASS EASTER SEAL SOCIETY

37 Howard Street
Worcester, MA 01609
(617) 757-2756
Serves all of state
Contact: Natalie Zaremba

Services
Provided:

Medical ■
Social ■
Educational ☐
Recreational ■

Age Range: All ages

Types of Children Served: Physically and multiply disabled.

Eligibility Requirements: None

Description of program: On site physical, occupational and speech therapy; social services; swim programs; camping. Parent support groups (in development), equipment loan; home health nursing.

Staff Composition: P.T., O.T., Speech Pathologists, Registered Nurses, M.S.W.

Previous service to visually impaired or blind children: Yes, all ages, have also had physical or speech disabilities.

Vision Specialist: No

Cost: None to parents.

Transportation: Not provided.

Duration of Program: Varies with Program.

Referral Process: Parents may call directly.

Services
Provided:

Medical ■
Social ■
Educational ☐
Recreational ☐

MASSACHUSETTS EYE AND EAR INFIRMARY

243 Charles Street
Boston, MA 02114
(617) 523-7900
Serves all New England
Contact: Eye Clinic for Medical care; Madeline Shipsey for Social Services.

Age Range: No limit.

Types of Children: Children who need eye, ear, nose throat care.

Eligibility Requirements: Need eye, earn nose, or throat care.

Description of Program: Eye specialists in every aspect of eye care. Casework service to parents regarding emotional or social problems associated with medical care, disability.

Staff Composition: Physicians, nursing staff, in-patient and out-patient clinics; caseworkers with master's degrees in Social Work, and two with B.A. degrees.

Previous Service to Visually Impaired or Blind Children: Yes, all ages.

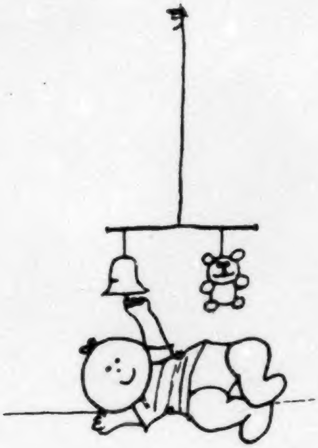
Vision Consultant: Not applicable.

Cost: No response for medical care; No fee for casework services.

Transportation: Patient is responsible.

Duration of Program: As needed.

Referral Process: Telephone call.



MASS REGIONAL LIBRARY FOR THE BLIND & PHYSICALLY HANDICAPPED

Services Provided:

Medical ☐
Social ☐
Educational ■
Recreational ■

Perkins School for the Blind
175 N. Beacon Street
Watertown, MA 02172
(617) 924-3434 x240 and/or
(800) 852-3133
Serves Statewide
Contact: Library Staff

Age Range: All ages.

Types of Children Served: Visually impaired, physically handicapped, learning disabled.

Eligibility Requirements: Must be unable to hold a book, turn pages or see to read normally printed book materials.

Description of Program: Free, mail-order public library services to eligible Mass residents; books in braille and recorded formats; equipment required to "read" the books is provided on free loan. The collection features picture books, beginning readers, elementary and secondary pleasure reading (as well as adult titles) but does not include textbook materials or musical recordings.

Staff Composition: Clerical staff fills book orders; shipping staff prepares books for shipment. This is a direct service office rather than a consulting agency.

Previous service to visually impaired or blind children: Yes, most successfully from age 3½ and up.

Vision Specialist: No response.

Cost: Free (tax supported) service.

Transportation: No response.

Duration of Program: Services provided throughout individual's lifetime if desired.

Referral Process: Client must complete and submit an application for service obtainable from our offices or from the Mass Commission for the Blind.

Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

NATIONAL ASSOCIATION FOR VISUALLY HANDICAPPED

305 East 24 Street
New York, NY 10010
(212) 889-3141
Serves Nation Wide
Contact: Lorraine H. Marchi
Executive Director

Age Range: All ages.

Types of Children Served: Partially seeing (not totally blind).

Eligibility Requirements: Partially seeing.

Description of Program: Large print textbooks, pleasure reading, news letter, informational literature for lay person and professionals working with partially seeing. Information and referral service. Clearinghouse of information about services for the partially seeing from public and private sources.

Staff Composition: Executive Director, Assistant, Secretary in New York, Regional Coordinator and Assistant in San Francisco (serving 11 Western states).

Previous service to visually impaired or blind children: Yes, 0-21.

Vision Specialist: As consultants.

Cost: Free - contributions are welcome.

Transportation: No response.

Duration of Program: No response.

Referral Process: To low vision centers, low vision specialists, Special Education services in local areas. Referrals are made by phone, letter or in personal visits.

Services
Provided:

Medical ☐
Social ☐
Educational ☐
Recreational ●

NEW ENGLAND AQUARIUM

Central Wharf
Boston, MA 02110
(617) 742-8830
Serves all New England
Contact: Cindy Richardson,
Education Department

Age Range: All ages.

Types of Children Served: All.

Eligibility Requirements: None.

Description of your Program: Easy access with ramps throughout the building. Is filled with exciting exhibits for all visitors. A "hands-on" exhibit, the "Edge of the Sea", recreates a tidepool where visitors can dip their hands into cold salt water and pick up live sea stars, sea urchins, and crabs. Through May 1984 a special exhibition, "Whales - New England's Wandering Giants", will be on display. (Features a life-size 47 foot sculpture of a humpback whale.) Visitors are encouraged to touch the whale or even sit on its flipper. This exhibit may give visually impaired visitors their best opportunity to examine a whale up close.

Staff Composition: No response.

Previous service to visually impaired or blind children: Visiting groups sometimes include school from for the blind. Visually impaired adults and children often visit as individuals.

Vision Specialist: No, but volunteers are available throughout the galleries to assist all visitors.

Cost: $5.00 for adults, $3.00 for children, $2.50 group rates.

Transportation: Must be provided by individual or group.

Duration of Program: Most groups allow 1-2 hours or more to explore the Aquarium.

Referral Process: No response.

NEW ENGLAND COLLEGE OF OPTOMETRY SPECIALTY CLINIC

422 Beacon Street
Boston, MA
(617) 266-8890
Serves all New England
Contact: Dianne Skvarcius,
Administrative Assistant

Services Provided:

Medical ■
Social ☑
Educational ☐
Recreational ☐

Age Range: All ages.

Types of Children Served: Children with some residual vision.

Eligibility Requirements: No wheelchair access, but willing to help patients in and out of Clinic.

Description of Program: Low Vision Clinic for children. The goal is to determine the infant or child's functioning level of vision and to identify educational techniques designed to stimulate visual development.

Staff Composition: Pediatric optometrists, educators, and psychological counselors.

Previous service to visually impaired or blind children: We have a population of visually impaired patients.

Vision Specialists: Described above.

Cost: No response.

Transportation: No response.

Duration of Program: No response.

Referral Process: Family may call for an appointment.

PEDIATRIC OPHTHALMOLOGY - CHILDRENS HOSPITAL

300 Longwood Avenue
Boston, MA 02115
(617)735-6415
Serves all of New England
Contact: Robert A. Petersen, M.D.

Services Provided:

Medical ☒
Social ☒
Educational ☐
Recreational ☐

Age Range: premature to twenty-one years

Typ[illegible] of Children Served: All

Eligibility Requirements: None

Description of program: Medical diagnosis and treatment of all eye abnormalities.

Staff Composition: Seven Ophthalmologists, one Orthoptist, two Clinical Psychologists, a Nurse, two Technicians.

Previous service to visually impaired or blind children: innumerable of all ages

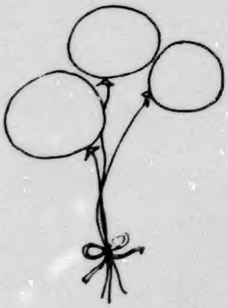
Vision Specialist: See above

Cost: No response

Transportation: Not applicable

Duration of Program: Not applicable

Referral Process: Parent may call office directly or be referred.



PERKINS SCHOOL FOR THE BLIND

175 North Beacon Street
Watertown, MA 02172
(617) 924-3434 X331
Serves Massachusetts on centerbased and outreach bases
Contact: Tom Miller

Services Provided:

Medical ☐
Social ■
Educational ■
Recreational ☐

Age Range: 0-6

Types of Children Served: Blind, visually impaired, deaf-blind, multi-handicapped, orthopedically impaired.

Eligibility Requirements: No formal requirements, beyond determination of program to adequately provide appropriate services.

Description of program: Preschool Services at Perkins is divided into two components. An Infant/Toddler Program for children 0-3 and a Preschool for children 3-6 years. The Infant/Toddler program is a home-based program with one center day per week and an active parent support group. The Preschool program is in session a half or full day Monday through Friday dependent upon student need. A full range of clinical services: Social Worker,OT, PT, Speech Therapy and Psychological Services are available to both programs.

Staff Composition: Infant/Toddler Program 2 teachers
Preschool Program 2 teachers and 1 teachers aide
Social worker- OT-PT, Speech and Psych services arranged as needed.

Previsous service to visually impaired or blind children: Yes,0-6 years of age

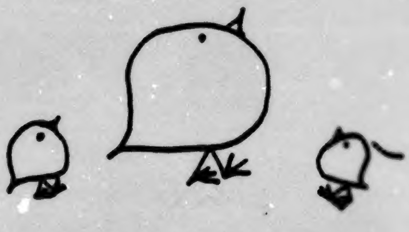
Vision Specialist: Yes, on site.

Cost: Infant/Toddler Program-funded by Perkins Board of Trustees.
Preschool Program-funded by tuition paid by local education authorities.

Transporation: Infant/Toddler-Parents responsibility
Preschool-bused by district

Duration of Program: 11 months/year

Referral Process: Referred by parents or outside agencies.



RETINA ASSOCIATES

100 Charles River Plaza
Boston, MA 02114
(617) 523-7810, x241
Serves an international patient population.
Contact: Nancy Wright
Coordinator

Services Provided:

- Medical ■
- Social ☐
- Educational ☐
- Recreational ☐

Age Range: All ages.

Types of Children Served: Children with some residual vision.

Eligibility Requirements: By referrals for Low Vision Rehabilitation. Prior approval required for special problems (language, etc.).

Description of Program: Low Vision Rehabilitation.

Staff Composition: Ophthalmologists, Optometrists, Pediatrian, Genetic Counselling, Psychophysics, Engineers.

Previous service to visually impaired or blind children: Yes, all.

Vision Specialists: No response.

Cost: No response.

Transportation: No response.

Duration of Program: As needed:

Referral Process: Call office for further information.

Services
Provided:

Medical ☐
Social ■
Educational ☐
Recreational ☐

VISION FOUNDATION, INC.
2 Mt. Auburn Street
Watertown, MA 02172
(617) 926-4232
Serves entire state; Nation
Contact: Fran Weisse

Age Range: All

Types of Children Served: A wide variety of special needs including diagnosed disabling conditions, chronic medical conditions, environmental risk or developmental delay.

Eligibility Requirements: None

Description of program: For VI children and their parents, our main service is our Information Center. Our groups are for adults.

Staff Composition: Three Professional Staff (full and part-time) three clerical and many volunteers.

Previous service to visually impaired or blind children: Information and Referral only for children.

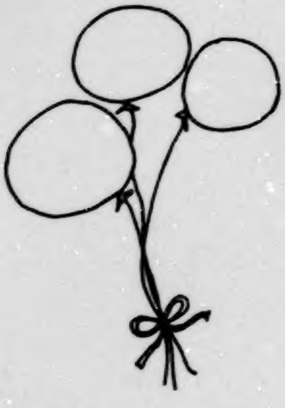
Vision Specialist: No

Cost: None

Transportation: Not provided for this service.

Duration of Program: As needed.

Referral Process: Call or visit the agency to obtain information from their files.



THE VISION REHABILITATION CLINIC

Services Provided:

Medical ■
Social ☐
Educational ☐
Recreational ☐

Gundersen Eye Clinic

720 Harrison Avenue
Boston, MA 02118
(617) 247-5638
Serves New England
Contact: Lynn McComiskey (LCSW)
Social Worker & Clinic Coordinator

Age Range: All ages

Types of Children Served: visually impaired

Eligibility Requirements: We are happy to evaluate any child with useable vision, no matter how minimal.

Description of Program: Multi-disciplinary team enables which works to insure maximal use of residual vision. Service emphasizes the education and recreational needs of the child. Research and development of new devices and techniques. (Not for totally blind children.

Staff Composition: Multi-disciplinary team approach

Previous service to visually impaired or blind children: Yes, from age three.

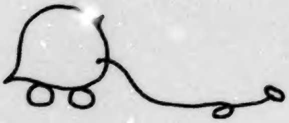
Vision Specialist: No, often times itinerant teachers are contacted.

Cost: First visit $60.50. Each follow-up $36.00

Transportation: Self

Duration of Program: Initial evaluation, then 2-3 follow-up appointments.

Referral Process: Can be obtained from a number of resources: ophthalmologist, state commission for the blind, itinerant teacher, parent.



NOTES

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